

DIABETES NEWS

SPRING 2025

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and Wellbeing Centre on
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Check out our website
www.diabetesjersey.com
for the latest information



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**THE BI-ANNUAL NEWSLETTER
THAT INFORMS PEOPLE WITH
DIABETES IN JERSEY**

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COMMENT

Spring Newsletter

Regular readers of the Diabetes Jersey biannual newsletter may well find this edition rather wordy but with diabetes there is always a lot to read about.

Issues in this edition talk about changes within the Diabetes Service, DESMOND – Type 2 structured education, an update on retinal screening, MODY, the link between diabetes and dementia and many other topics of interest.

Monday 9 June is the first day of National Diabetes Week which lasts until Sunday 15 June. Diabetes Week is a week to make some noise, raise awareness and shout about the things that matter to people with diabetes, shining a light on what it's like to live with the condition day in, day out, for the rest of your life. Diabetes Jersey intends to do all these things during that week (although shouting may be slightly overstating what we will be doing). In Jersey, the Week will conclude with the 2025 annual North2South Country Walk, this year starting from Grosnez Castle to Corbière via what will be mostly public footpaths.

For a trial period this year from April onwards, Diabetes Jersey will be creating awareness of diabetes with posters at the bus station and the major public car parks. This is a departure from relying on the mainstream and online media. With statistically one more person being diagnosed with diabetes in Jersey every day and with it being understood that there may be as many as 3,000 local residents who either have the condition and do not know it or are on the cusp, we believe it is vital for the public to be aware that there is a disease out there that is as potentially damaging as any other lifelong condition and one that you cannot be vaccinated against.

In the meantime keep well and keep safe.

Peter Tabb
Editor
peteretabb@gmail.com

CHANGES WITHIN THE DIABETES SERVICE

Enid Quenault Health & Wellbeing Centre

Towards the end of 2024, we made some important changes to the Diabetes Service.

- Launch of inpatient service
- Launch of community service
- Expansion of structured education

Why did we need to make changes? Diabetes care has changed enormously over the last 10 years. We have seen the rapid advancement of technology use for both monitoring and insulin delivery in type 1 diabetes, and some type 2 diabetes, and we now we have a plethora of treatment options for type 2 diabetes. Structured education, once limited to very small patient numbers is now seen as a mainstay of treatment in both type 1 and type 2 diabetes along with the use of app based technology. This is key to expert self management of diabetes which has proven to raise health outcomes in all types of diabetes. As diabetes treatment is changing, we need to change with it!

Along with aligning to the national changes, we have also responded to local feedback – patient feedback has informed us that admission to hospital (for someone with diabetes) was not always a positive experience. Some people felt disempowered, that they were ‘not listened to’ or were unable to make decisions surrounding their diabetes care, even if their admission was for something unrelated to their diabetes. We learned that those caring for people with diabetes in the hospital sometimes lacked basic knowledge about diabetes care.

We heard from patients and relatives of people in residential or nursing homes, or those who are housebound, that they were not receiving an equitable service. Those that are unable to travel to Enid Quenault to attend appointments were reliant on telephone consultations which are not always appropriate.

We have listened to our colleagues in primary care and their request for more ‘joined up’ working. GPs and practice nurse colleagues are keen to become more involved in diabetes care and have requested our input to access training and upskilling for their teams.

It was clear that there was a requirement to make changes, in order to meet the needs of our island population and therefore our service has been redesigned to deliver diabetes care at the time of need in the most appropriate setting, by the most appropriate person.

- Inpatient service is a 5 day per week service and aims to support people with diabetes during their admission. It is estimated that 1 in 6 people in hospital at any one time have diabetes, so not all will need to be seen by the specialist inpatient team. Those who are starting new treatments or require changes to treatment whilst inpatient will generally be referred to the service. Anyone with a new diagnosis of diabetes will be referred to us and all complex discharges will be assisted with. Teaching is being delivered both ad-hoc and formally to medical and nursing staff and feedback questionnaires are being developed to help audit the service. Policy and procedure to underpin hospital diabetes care is being reviewed and developed. The overall aim is to improve the experience for those admitted to hospital but other outcomes will be to make hospital discharges safer and more timely, and to empower all staff to deliver every day diabetes care with confidence. Clinic appointments are offered at the general hospital soon after discharge for those that require close follow up, this is currently on a Friday but is hoped to extend to other days once a full time base is secured. We continue to work alongside our obstetric colleagues in the high risk pregnancy clinic at the hospital on Wednesdays, and remote and in person support is given for people with gestational diabetes. The inpatient team is delivered full time by Sr Frances Lane and Sr Cyril Regachuelo-Du and part time by consultants Dr Elias Chacko and Dr David Hopkins.

- Community service is a 4 day per week service led by Sr Angela Buesnel. Angela is working closely with Family Nursing and Home Care to provide support and advice when needed for patients on their caseload. Angela is able to occasionally visit patients at home to agree a care plan which can then be delivered by the GP or community nurses. Angela is also working with GP colleagues to support them in managing diabetes care for people who can attend their GP practice. DESMOND education program (structured education for people with type 2 diabetes) continues on a weekly basis and the hope is that this can be offered at more convenient parish locations during 2025. Angela is delivering teaching to staff employed in nursing and residential homes.

- Enid Quenault Centre – clinics are held for complex type 2 care, and all type 1 care. All clinics are offered ‘in person’ but we are happy to make appts on teams or phone call if requested. Clinic days have been expanded to offer an 8am slot and a 5pm slot to accommodate working people. Dietitian appts are available ad-hoc when needed during the type 1 clinics to save repeat trips to EQ. Pump starts and pump reviews are generally managed remotely and DAFNE (structured education for people with type 1 diabetes) now runs continuously throughout the year. We are part of the pilot study of a new structured education program, this is for people with type 2 diabetes who are on insulin and aims to assist them with carbohydrate counting and insulin dose adjustment – This course is called VICTOR (Variable Insulin for Changes to Routine). Our pilot group has given enthusiastic feedback so far, and if the course is rolled out nationally then we intend to continue delivering this in Jersey.

Type 1, complex type 2, DAFNE, VICTOR and pump starts/pump reviews are all delivered full time by Sr Sally Hilton, Sr Faith Brown and Sr Clare Wilson. Sally has also assisted with some of the paediatric clinics whilst Celia has been on maternity leave and all support young adult clinics when they transfer from the paediatric to the adult caseload.

PDSN Sr Keertee Beejmohun manages the paediatric caseload along with Sr Celia Devlin who we will welcome back in the summer. Keertee and Celia manage all aspects of diabetes in children aged 0-18, including liaison with Robin ward to support new diagnosis, in person clinics, home and school visits, pump starts and pump reviews and delivery of the paediatric structured education SEREN.

Due to the redesign of the service, we are no longer able to always support 'drop-in' visits from patients. This is simply because there is not always a nurse or doctor based at EQ. We request that you phone (444599) or email (H.diabetes@gov.je) to request a time. We endeavour to reply to your message within 3 working days but in reality this is often a lot sooner. If a request is more urgent than this, then a GP or A&E visit is more appropriate as we are not an emergency service. An emergency supply of replacement insulin pens is currently kept in A&E and we are working towards a system where glucometers and insulin pens can be replaced in the community. Insulin pump users have a procedure to follow in the case of a pump failure.

I hope that this gives a flavour of what we are trying to achieve for our patients and service in 2025 and going forwards. We really do welcome your feedback – please do contact me directly by email or phone if you have any suggestions!

Sally Hilton

s.hilton2@health.gov.je

07797861393



Enid Quenault Health & Wellbeing Centre

MATURITY ONSET DIABETES OF THE YOUNG (MODY)

Many of you will be aware that the Charity is funding a genetic testing programme throughout this year, to support those individuals who might be at risk of having this rare form of diabetes.

The key features of MODY are:

- Being diagnosed with diabetes under the age of 26;
- Having a parent with diabetes or with diabetes in two or more generations; and
- Not necessarily needing insulin.

MODY is very rare compared with Types 1 and 2 diabetes - experts estimate that only one to two per cent of people with diabetes in the UK, including the Channel Islands, have it. In Jersey, relying on that estimate, the figure would be between 45 and 90 patients. It is because MODY is so rare, doctors may not be aware of it, or the practitioner is not advised on diagnosis by the patient, that a close family member has this form of diabetes.

Most types of MODY carry a risk of long-term complications of diabetes.

It is important to know if you've got MODY for the following reasons:

- To make sure you get the right treatment and advice for your type of diabetes;
- As there is a 50 per cent chance of a parent with MODY passing it on to each child, you can discuss the risk to any children you have or plan to have.

Genetic testing can be offered in the right circumstances to other family members.

If you think you might have MODY, you should discuss the matter with your doctor, who will decide whether or not to refer you for testing by a staff member at the Diabetes Centre.

Testing for MODY involves having blood taken for pancreatic antibodies and blood or urine for C-peptide and then sent to the specialist centre based in Exeter.

(Reproduced in part from a Diabetes UK publication)

CHAIRMAN'S REPORT

Inaction by Senior Civil Servants!



It is with some regret I have to inform you that despite its best efforts since 2019, the Charity has been forced to abandon the funding of a qualified individual to work in the area of the prevention of Type 2 diabetes. This initiative, while supported politically and from within the Diabetes Service, was at various times met with inaction by senior civil servants working within the Health & Community Services (HCS) Department who were either prevaricating or not that concerned about recruiting an individual to the post despite being at nil cost to the taxpayer.

During 2024, Diabetes Jersey was invited by Public Health to play its part within a working group to establish a 12-month pilot programme to prevent the onset of Type 2 diabetes. While this initiative is welcome, the Charity did initially indicate that it would offer to fund a post in the belief that a medically qualified person would deliver the education package envisaged. Unfortunately this did not come to fruition as it was evident that Public Health wished to employ an individual, not necessarily experienced in the delivery of diabetes-related education. As this was considered by the Charity as not making best use of its funds,

it has since offered to fund ancillary costs which are intended to be of direct benefit to those receiving the education during the pilot stage. It is of some interest to Diabetes Jersey that no representative of the Jersey Medical Society (GPs) form part of the Working Group despite such input is considered vital.

In the knowledge that, in 2019, HCS had agreed to fund a part-time psychologist from within its then existing budget, it was with dismay that the Charity was made aware that the assurance given to it had been withdrawn, given the inability of HCS to recruit an individual to this position; despite Diabetes Jersey offering to part-fund a full-time post for a period of three years. The Charity had been advised on a number of occasions that HCS had struggled to recruit an individual to the part-time post, but to take the decision to let this post go, without announcing an alternative pathway to access this aspect of care, is questionable at the very least.

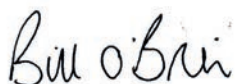
The funds that had been earmarked for both the preventive and psychological posts will now be re-considered by the Governing Committee of Diabetes Jersey.

What has been agreed between HCS and the Charity is the formulation of a patient survey, whereby the former will circulate it to patients on our behalf. Work on preparing this survey will commence later this year.

Both Eyecan and Diabetes Jersey are represented on the Diabetic Retinal Screening Steering Group which meets annually to consider management information provided by the service.

When compared to the UK, the local service is performing very well, but there is always room to improve. With this in mind, both charities have agreed to fund an external review of this service to ensure that service delivery standards remain high.

While a date has yet to be set, the Annual General Meeting of Diabetes Jersey will be held in June. A further announcement will be made on our website and social media pages in the coming weeks. I would encourage you all to consider attending this important meeting. In order to have a voting right you will however, need to be registered as a Member of the Charity. (See Application Form on Page 21). We also have some 600 Club Tickets left so please complete the Application Form on Page 8.



Bill O' Brien

Chairman

Diabetes Jersey

CHARITY FUNDING FOR THE CENTRE



November saw the opening of the Collette Labey Paediatric Waiting Room at the Enid Quenault Health and Wellbeing Centre situated at Les Quennevais.

Collette has raised a very significant amount for Diabetes Jersey in recent years and the charity's governing committee agreed to fund the entire cost of refurbishing the room and to have it named after her.

This year the Charity has earmarked a sum of £20,000 to support staff at the Centre, which includes podiatry and retinal screening services.

One item already purchased is an enhanced toe and ankle pressure device. Together with EYECAN, Diabetes Jersey has agreed to fund a review of the Retinal Screening Service.

A number of courses and conferences will also be funded by our charity during the year.

Free recycling service for users of Novo Nordisk pre-filled pens

Pre-filled disposable pens are the most common formulation of insulin used in Jersey, accounting for two in every three prescriptions for insulin. They contain an important medicine and are with pen-users wherever they go. Because of this, they are made from high quality, long-lasting materials that are too good to waste. By finding new ways to reuse them, we can help improve environmental sustainability.

A free recycling service is now available for Jersey people who use pre-filled insulin pens manufactured by Novo Nordisk (PenCycle scheme).

PenCycle – Recycling scheme for patients using Novo Nordisk manufactured pre-filled pens



1. Collect from your participating pharmacy or apply online for a postage-paid returns box by scanning the QR code, clicking the link or by telephone to register for a supply to be sent to your home address.

<https://order-form.pen-cycle.co.uk/>

Tel 0800 023 2573 (Mon – Fri 8.30am–5.30pm and Bank Holidays)



2. When a pre-filled pen is empty, remove and safely dispose of the needle. **DO NOT** put needles in the returns box.



3. Fill the returns box with 10-12 used and empty and needle-free pens. Keep the returns box and empty pens out of the reach of children. When full, seal the returns box and take it to a Jersey Post Office. Complete a Customs Declaration Form (CN22) and post back to the UK (postage is pre-paid). The disposable pens will then be recycled.



4. Follow step 1 to obtain a new returns box and continue to recycle your used pre-filled pens.

Which pens are eligible for the Novo Nordisk PenCycle recycling service?

Fiasp® FlexTouch®	NovoMix® FlexPen®	NovoRapid® FlexTouch®
NovoRapid® FlexPen®	Levemir® FlexPen®	Tresiba® FlexTouch®

For further information about the [PenCycle Service](#) scan the QR code:





APPLICATION TO JOIN THE DIABETES JERSEY 600 CLUB - JULY TO DECEMBER 2025

Title.....Forename(s).....Surname.....

Age.....Address.....

.....

Postcode.....Email:.....

Telephone.....

a) I wish to purchase.....ticket(s) at £20 each and enclose a cheque payable to 'Diabetes Jersey' or Cash in the amount of £.....

b) I wish to pay online and my unique reference number is 600.....

If available, I would prefer ticket number(s).....

Confirmation of Terms and Conditions

I agree to the terms and conditions and by declaring my age and signing below, confirm that I am aged 18 years or over. I also confirm that any gift of a ticket that I make, will be to an individual aged 18 years or over and a resident in Jersey. (Required by the Jersey Gambling Commission).

Signed.....Date.....

Please tick the appropriate box(s)

☐

I would like to be contacted in due course to renew my membership of the 600 Club

☐

I do not wish to be contacted in regard to renewing my membership of the 600 Club

I would like to receive a copy of the charity's Newsletter by Email ☐ or

Post ☐ as and when published. **Only to be requested if you are not already on the charity's mailing list**

Please return the completed form and payment to: Diabetes Jersey, 7 Amitie Court, Links Estate, La Rue A Don, Grouville JE3 9DB



DIABETES JERSEY
600 CLUB TERMS AND CONDITIONS

1. The 600 Club is a Lottery with 9 cash prizes of £150, £75, 3 of £30 and 4 of £25 each month, with an additional prize of £600 and 2 of £60 offered in the second December Draw. All applications and payment for tickets must be received by 25th June.
2. The total number of tickets offered is 600, each priced at £20 and valid for 12 Draws.
3. You must be 18 or over to purchase a ticket or tickets.
4. Diabetes Jersey reserves the right to undertake age verification checks believed necessary to comply with the law and Jersey Gambling requirements.
5. Payment for any ticket(s) must be received prior to the commencement of the Club in July.
6. Ticket holders are responsible for advising the charity on a change of contact details by either email to 'wobriendj@gmail.com' or writing to Diabetes Jersey, 7 Amitie Court, Links Estate, La Rue A Don, Grouville JE3 9DB
7. The twice monthly Draw takes place at the Pomme D'Or Hotel during the morning of the First and Third Friday of each month between July and December.
8. An individual may hold more than one 600 Club Ticket.
9. Prize winners will be notified by letter within two weeks of the Draw.
10. Results of each Draw will be published on both the charity's website and Facebook page and in its Newsletter, as and when published.
11. Diabetes Jersey will only use your personal data for the purposes of administering your participation in the Draws. To comply with the requirements of the Jersey Charity Commission, the charity has to retain all financial records, which in part will include personal data, for a period of 5 years.
12. All tickets and any subsequent winnings must be in the name of the purchaser.
13. To purchase a ticket(s), please complete the Application Form and (a) return by post together with a cheque made payable to Diabetes Jersey or cash to: Diabetes Jersey, 7 Amitie Court, Links Estate, La Rue A Don, Grouville JE3 9DB or (b), if you prefer to pay online just complete and return the form to the same address BUT quote a unique reference commencing with the number 600, followed by 4 letters (eg 600AHVP).

The bank details for online payments are as follows:

Bank Name: Diabetes Jersey

Account Number: 78057256

Sort Code: 60-12-03

Reference: 600****

Please remember to acknowledge that you have read these Terms and Conditions and agree to them.

January 2025

RETINAL SCREENING UPDATE



The Jersey diabetic retinal screening programme continues to run well. To our knowledge, we are the only one of 14 offshore British territories (Crown Dependencies and British Overseas Territories) to be using an accredited NHS screening programme as part of our grading pathways. For the full year 2023, 91.4 per cent of patients took up the offer of routine digital screening, compared to 79.1 per cent in the English screening programme.

The 98.6 per cent of attendances led to a result letter being issued within three weeks of image capture, compared to 96.9 per cent in the English screening programme.

We continue to engage with Government IT (Digital Services) to endeavour to secure their support for software upgrades that would allow the retinal screening service to communicate with patients and referrers by SMS text message and email. This is especially important as our uptake data clearly shows reduced uptake of screening in the younger age groups between the ages of 16 and 29 years – an age group whom we know to rely more on email and digital communications in general.

We were extremely grateful for the support of Diabetes Jersey in sending our team to the British Association of Retinal Screening (BARS) conference in Liverpool in 2024, where one of our screeners, Milena Tatarczak, was elected to the BARS council, and our optometrist, Sarah Lake, was presented with the runner-up award for the Jersey team's submission in the BARS Clinical Photograph competition.

Finally, I have been invited to deliver a brief talk on the Jersey Retinal Diabetic Eye Screening Conference at the Royal Society of Medicine in London in this April.

Future projects will include securing IT support for software upgrades to allow us to adopt new grading standards this year (R2H and R2L), as well as trying to move to wide-field cameras to reduce image capture time and the requirement for pupil dilation.

It is fantastic that Diabetes Jersey's support has allowed us to put Jersey on the national retinal screening map, allowing us to conduct essential networking with colleagues from the other British nations, and crucially, share ideas for service development.

Mr Anish N. Shah MBBS BSc (Hons) FRCOphth FEBOphth
Consultant Ophthalmic & Vitreoretinal Surgeon
Clinical Lead, Jersey Diabetic Retinal Screening Programme (2024 -)
Clinical Lead, Department of Ophthalmology (2016 - 2024)

DIABETES AND DEMENTIA LINKED

A drug that is already used to treat diabetes may cut the risk of developing dementia by a third, a major study has found. Globally, around 55 million people have dementia, a number that is expected to triple by 2050; but there is no cure, and existing treatments only bring about small improvements.

For the new research, scientists in South Korea analysed data on 220,000 people aged 40 to 69 with Type 2 diabetes. Half were taking sodium-glucose cotransporter-2 (SGLT-2) inhibitors, pills that lower blood-sugar levels in patients with diabetes; the rest were taking dipeptidyl peptidase-4 (DPP-4) inhibitors. All were free of dementia at the start of the study and, over the next two years, 1,172 were diagnosed with the condition. Those taking SGLT-2 inhibitors were found to have a 39 per cent lower risk of Alzheimer's, and a 52 per cent lower risk of vascular dementia, giving them a 35 per cent lower risk of dementia overall.

The results are not entirely surprising: diabetes is a risk factor for dementia. Why that should be is not clear, but it may be that the damage diabetes can cause to blood vessels also hastens cognitive decline.

However, the study does not prove cause and effect; and other experts have suggested that a flaw in the methodology could have produced the striking result.

(Reprinted from THIS WEEK, 2024)

DESMOND: Type 2 structured education

A short update regarding DESMOND education for people with Type 2 diabetes. DESMOND stands for Diabetes Education for Self-Management of Ongoing and Newly Diagnosed. This course is available for everyone with Type 2 diabetes, in particular for those who are in their first 12 months of diagnosis.

So why take part in DESMOND?

DESMOND has been running for 25 years and was devised in Leicester University Hospital. It is widely used across the NHS and Australia. It follows a set curriculum delivered by trained, accredited DESMOND educators who must meet rigorous standards. It is available as:

- a whole day 09:30-16:30 hours or two half days in the morning for face-to-face groups of up to ten people, (you can bring a partner or friend if you wish) on alternate Tuesdays at the Enid Quenault Health and WellbeingCentre.
- an online virtual option that you can access in your own time on a mobile phone, tablet or laptop.

If you have never attended structured education, you can still access it and can self-refer for the virtual option, or ask your GP to refer you. Currently the education is only available in English. However it is anticipated that group education could be provided in other languages in the future.

What does the DESMOND course cover?

There are specific modules and activities to inform and involve group interaction about

- thoughts and feelings of the participants around diabetes
- understanding diabetes and glucose – what happens in the body
- understanding diabetes associated risk factors and complications
- understanding more about monitoring and medication
- how to take control and self-manage – food choices, physical activity
- planning for the future

How can I enquire about DESMOND?

Contact us and leave a message on

T.444547 (voicemail), or email: JerseyDESMOND@gov.je

We look forward to meeting you!

DESMOND education modules are designed to help you improve your general understanding of type 2 diabetes; it also helps to:

manage blood glucose levels and other biomedical outcomes such as blood pressure

supports weight reduction

improves levels of physical activity

and promotes positive behaviour change.

A PRESENTATION BY DR DAVID HOPKINS TO GP'S AND PRACTICE NURSES



Diabetes Jersey is hosting a presentation on Saturday 21 June, to be given by Dr David Hopkins, Consultant Physician and Clinical Lead of the Diabetes Service, to General Practitioners and Practice Nurses.

This will provide an opportunity for medical practitioners working within Primary Care, to receive updated information relating to the care of those with diabetes, including the diagnosis of the MODY form of diabetes and the proliferation of prescribing weight loss drugs in non-diabetic care.

INTRODUCING ONEAPP: A smarter way to manage diabetic conditions in Jersey



Healthcare is evolving, and so are the needs of patients and providers.

To address these growing challenges, OneApp has been developed as an innovative healthcare technology solution designed specifically for Jersey. Created in Jersey for Jersey residents, OneApp delivers practical and personalised healthcare management solutions that empower individuals to take charge of their health.

Why OneApp?

OneApp serves as a comprehensive, lifelong personal care record accessible via mobile devices. It enables patients, healthcare professionals and systems -

including doctors, nurses, pharmacists, electronic health records and wearable devices - seamlessly to input and analyse health data.

Key features:



Personalised Care Pathways – OneApp analyses data in real time to create evidence-based, individualised health plans with interactive alerts, reminders and follow-ups to improve outcomes.



Multi-language coming soon.



Health Promotion and Wellbeing Programmes – Encouraging self-care and independence while reducing hospital visits.



Cost Efficiency – By enhancing health management and reducing care costs, OneApp benefits patients, providers, insurers and employers alike.

Successful soft launch with Diabetes Jersey

On Saturday 8 February, OneApp was successfully soft launched in collaboration with Diabetes Jersey, onboarding 25 patients during the event. The launch demonstrated OneApp's ability to create personalised care pathways for individuals enhancing diabetes management.

Initial Patient Groups:



Type 1 diabetes patients



Type 2 diabetes patients

One of the key contributors to this initiative is Nathan Wright, a Type 1 diabetes patient, who has provided invaluable feedback during the onboarding process. His insights will help refine OneApp for a seamless experience for the patient.

Expanding OneApp's reach

Beyond diabetes management, OneApp supports care pathways for nine long-term conditions:

- Asthma
- Atrial Fibrillation
- Chronic Obstructive Pulmonary Disease (COPD)
- Coronary Heart Disease
- Diabetes
- Heart Failure
- Hypertension
- Stroke or Transient Ischaemic Attacks

As healthcare costs rise and demand for elderly care grows, OneApp aims to help patients maintain independence at home, reducing costs for families and the Jersey Government while ensuring efficient healthcare management.

Looking Ahead: Integration and Expansion

With the upcoming hospital development, this is the perfect time to explore how OneApp can be integrated into healthcare systems and organisations.

Are you a healthcare provider or an organisation interested in OneApp? I'd love to connect! Reach out to discuss how OneApp can support your team and patients. Together let's revolutionise healthcare in Jersey.

Nathan Wright

A Type 1 diabetes OneApp Evangelist



NEWS

DINE 4 DIABETES – 22nd November 2025

Over the past decade Collette Labey, the prolific fundraiser, has raised substantial funds for the Charity, more recently through her Dine4Diabetes Balls. This year, the theme for the Ball, which is being held at the Merton Hotel on the evening of Saturday 22 November is 'The BIG Top Circus'. Tickets are priced at £100 with tables for up to 10 people available. This event is usually a sell-out, and an early expression of interest is recommended. Please contact Collette on (07797 729163) to book your seats or tables.

In conjunction with the event, the draw for her Raffle will be held. Tickets, priced at £10 each, will be on sale from June and any support from those aged 18 years and above who can help to sell tickets would be appreciated. Additionally Collette is looking for people who might be in a position to donate a prize.

There will also be an Auction to culminate on the night and the donation of lots would be most appreciated.

At the time of going to press, Collette is also seeking sponsors and for further information, please telephone her.

In respect of Raffle Prizes or Auction Lots, please contact Collette or Bill O'Brien (07797 826508)



SUPPORT GROUPS – Type 1 & 2

Meet the team:

**LIZ
FREEMAN**
TYPE 1
REPRESENTATIVE

Diabetes Jersey would like to introduce **Liz Freeman** who is on the General Committee and is our Type 1 Representative.

Liz Freeman - Email: betsff@yahoo.co.uk

Meet the team:

**CASS
CHANNING**
TYPE 2
REPRESENTATIVE

Diabetes Jersey would like to introduce **Cass Channing** who is on the General Committee and is our Type 2 Representative.

Cass Channing - Email: c.channingt2d@gmail.com

RACE NIGHT – Friday 14th November



Our Next Race Night will be on Friday 14th November at the Merton Hotel. Always a night of fun, it attracted over 130 people when last held.

Make a note in your Diary for now and invite friends and family to join you.

Tickets will be available from September and further information will be provided on our social media pages in due course.

FROM GROSNEZ TO CORBIÈRE – THIS YEAR'S NORTH2SOUTH COUNTRY WALK

On Sunday 15 June, at the conclusion of this year's National Diabetes Week, the popular annual Diabetes Jersey North2South Country Walk will take place,

**CANCELLED DUE TO
UNFORSEEN CIRCUMSTANCES
WILL RETURN NEXT YEAR**

at the time of booking.) Each journey costs £2.

The N2S Walk is a major fundraiser for Diabetes Jersey and entry costs £15 per person if booked in advance or £25.00 on the day. Bookings can be made online to <https://race-nation.co.uk/register/north2south-walk/2025>.

On completion of the Walk why not take advantage of a cup of tea (or something stronger) and a sandwich which are served all day at Corbière Phare. The restaurant is also open for lunch between 12.30 pm and 2.30 pm. If you want to take advantage of lunch, you must book by calling 746127 to confirm a registration. If you book but then are not able to attend, please advise the restaurant accordingly, giving at least 72 hours' notice.

This event is organised to support Diabetes Jersey's ongoing commitment to support the people of Jersey with diabetes to ensure that all persons in the Island with diabetes receive the best possible care and attention.

SO WHAT'S IT LIKE HAVING A CHILD WITH TYPE 1 DIABETES?

A bit about us. I have two children, aged 15 and six years, and we have been living with this condition for seven years now.

My older daughter was diagnosed with Type 1 diabetes at the age of eight when she almost died while on holiday. Since then life has never quite been the same; we have almost lost her three times.

If I say some days are hard it would be an understatement, but equally we have to get on with life. I have to treat my daughter like any other teenager and give her the freedom to live her life all the while keeping her alive and safe.

As I am sure you would all agree, bringing up a teenager is hard work. They aren't always honest with you and want to be independent. But equally they aren't yet old enough to take responsibility for everything. Add Type 1 into the mix and God knows it's hard some days. You are constantly second guessing; what they have really eaten on the way home from school, did they really do the correct dose of insulin, why did they not eat their lunch, why didn't they check their bloods, why didn't they do any insulin, why do they think it's OK to eat their hypo food (biscuits are used to bring blood sugars back up – life saving equipment) because they were hungry. All the while having eyes rolled at you with the typical teenager attitude.

As a Mum you don't expect to have to become a medical expert on your child's condition or have to save their life, but when you are put in that position, you have no choice. You become the expert, you understand their needs better than medical professionals, you constantly fight battles that your child has no idea about, you educate yourself on medical advancements and disability law, you do this all with little support or training because as a Mum that is what you do!

The harsh reality of Type 1 is that high or low blood sugars can cause death and have long term implications on the body. My daughter is like a cat with nine lives, we have almost lost her four times now. The first was a complication of high blood sugars due to being undiagnosed, the last three times were due to very low blood sugars at night when she is asleep. Sadly, she doesn't wake when her blood sugar drops very low; the first we know of it is a bang from her falling out of bed unconscious and having a seizure. This is something no parent should ever have to see, yet I have to compose myself enough to save her life, give her an injection (which I have no training to give) and do so as the alternative (her death) is not an option I can even begin to imagine.

The emotional impact on my daughter and me of this situation is massive. How can you really cope with saving your child's life and seeing them almost die more than once? The impact on my daughter is heartbreaking. She has a fear of going to sleep in case she doesn't wake up, fear of being on her own in case this happens and I am not there to save her. She keeps thinking what if I didn't hear her or she didn't fall out of bed. Getting her back to school is hard as she is dealing with trauma that none of her friends or teachers can truly understand.

Right now we are moving forward again and finding the strength to get life back to normal, to stop overthinking things and finding support where we can.

Life can be hard for us all but we have been given another chance and for that I am truly grateful.

Anon. Type 1 Mum.

600 CLUB RESULTS FOR 2024

Results for the Draws held between September & December

DRAW	£150	£75	£30	£25
20th Sept	213	156	31, 414, 463	151, 371, 493, 514
4th Oct	20	133	314, 418, 486	125, 146, 174, 189
18th Oct	415	99	31, 478, 522	109, 168, 340, 592
1st Nov	432	499	270, 438, 594	142, 412, 489, 523
15th Nov	93	26	65, 436, 529	193, 362, 405, 522
6th Dec	62	199	190, 236, 463	35, 288, 466, 575

Christmas Draw Held on 20th December

**£600 No: 234, £150 No: 317, £75 No: 27, £60 Nos: 523 & 563,
£30 Nos: 69, 367, 477, £25 Nos: 176, 357, 459 & 564**



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TITLE AND FULL NAME

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MOBILE NUMBER

DO YOU HAVE DIABETES? **YES** **NO**

TYPE 1 ☐ Please tick appropriate box

TYPE 2 ☐

WOULD YOU LIKE US TO EMAIL YOU ABOUT UPCOMING EVENTS/MEETINGS ETC.? **YES** **NO**

SHOULD ANY OF THE INFORMATION PROVIDED ABOVE CHANGE, I SHOULD BE VERY GRATEFUL IF YOU WOULD ADVISE US BY EMAIL AT carmeloc2201@gmail.com

PLEASE HAND IN YOUR COMPLETED FORM TO A MEMBER OF THE DIABETES JERSEY COMMITTEE OTHERWISE PLEASE MAIL THE FORM TO:

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HAVRE DES PAS
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JE2 4HP**

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HAVE YOU EVER WALKED ALL THE WAY FROM GROSNEZ TO CORBIERE?



WE'LL NOW GIVE YOU THE CHANCE TO FIND OUT HOW ON PAGE 18!

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