



16 March, 2012

Natalie Davis
Therapeutic Group Manager
PHARMAC
PO Box 10-254
Wellington
NEW ZEALAND

Tēnā Koe

[Proposal to list insulin pumps and consumables](#)

The New Zealand Nurses Organisation (NZNO) welcomes this opportunity to make a brief submission on the above proposal. We have consulted its members and staff in the preparation of this submission, in particular the Diabetes Nurse Specialist Section (DNSS), Neonatal Nurses College Aotearoa (NNCA), the College of Primary Health Care Nurses (CPHCN), and the Gerontology Section; and nursing and policy advisers. We advise however that the large number of documents and short timeframes for consultation have precluded our ability to provide specific feedback on all these proposals.

However, we can refer you to earlier feedback on the provision of insulin pumps via our submission to on the [discussion document on the possible expansion of PHARMAC's role](#) (April, 2010) the relevant details of which appended below. It is not clear where PHARMAC's purchasing powers sit in relation to those Health Benefits Limited and some clarification of that relationship would be useful.

The most important point we wish to make is that nurses must be fully represented on the panel of clinicians which would assess applications for funding. Nurses are the clinicians most concerned with the day to day management of diabetes in a wide variety of health settings and are well able to

anticipate planning and implementation needs to ensure that purchases meet consumers' health needs. There are numerous instances of poor product choices which have impacted negatively on health outcomes, continuity of services and costs, which could have been avoided had nurses been consulted. The strength of nurse representation on the panel should reflect the range of diabetic services they are involved in and the amount of consumer contact. Nursing voices are often isolated on expert panels.

NZNO strongly supports the proposed subsidy for insulin pumps and consumables.

Nāku noa, nā



Marilyn Head

Policy Analyst

Phone: 04 494 6372

Email: marilynh@nzno.org.nz

Extract on Insulin Pumps from NZNO's Submission to PHARMAC on the [discussion document on the possible expansion of PHARMAC's role](#)

1. Insulin pumps are an excellent choice for young people with type 1 diabetes (which comprises 10% of the diabetic population) helping them to manage the disease more effectively and keeping them out of hospital. However they are expensive and currently only some families can afford them. The DNSS supports the proposal to purchase insulin pumps *in principle* as it has the potential to improve equitable access to available treatments for the population nationally.
2. As the health care professionals mostly involved with the care of people with diabetes, in particular those at greater risk of short and long term complications due to co-morbidities, age (paediatric and the elderly) or diminished ability for self care, Diabetes Nurse Specialists (DNS) are aware of some issues that may compromise safety or create difficulties in the future

and we recommend that they are well represented/consulted about purchasing decisions for insulin pumps.

3. Initiating insulin pump therapy requires intensive training to ensure safety and optimal effectiveness and the DNSS recommend that the cost of resources required for this should be included as part of the funding.
4. Specific questions/suggestions the DNSS has made in relation to the proposal to purchase insulin pumps are:

- How will funding be structured?
- If lowest price is the most important criteria, how can we ensure quality of pumps, training and back-up?
- How will consumer and clinician choice, especially for children, be managed – smaller doses and incremental changes?
- Will the funding cover consumables - if so how will this be managed?
- Will there be funding for initial clinical education?
- If funding for a pump is granted to a patient, will there be commitment for the patient to attend pre-education and clinic ongoing?
- Achievement of clinical goals e.g. reducing number of hospital admissions or severe hypo- / hyperglycaemic episodes;
- Will there be an option to remove pump if not achieving expected goals?
- Consideration should be made in regard to how many pump starts a service can do every year. For example, in paediatrics, perhaps provincial services should work alongside a centre of excellence when initiating pump therapy.

ABOUT NZNO

The New Zealand Nurses Organisation (NZNO) is the leading professional and industrial organisation for nurses in Aotearoa New Zealand, representing over 46 000 nurses, midwives, students, kaimahi hauora and health workers on a range of employment-related and professional issues. Te Runanga o Aotearoa comprises our Māori membership and is the arm through which our Te Tiriti o Waitangi partnership is articulated.

NZNO provides leadership, research and support for professional excellence in nursing, negotiates collective employment agreements on behalf of its members

and collaborates with government and other agencies throughout the health sector. Nurses are the largest group of health professionals comprising half the health workforce.

The NZNO vision is “Freed to care, Proud to nurse”. Our members enhance the health and wellbeing of all people of Aotearoa New Zealand and are united in their professional and industrial aspirations to achieve a safe, sustainable and accessible system of public health care for all New Zealanders.