Where have all the DSNs gone?

The DSN role has been around for approximately 60 years. It was developed, and continues to develop, to specifically meet the needs of people with diabetes and their families. As part of a multidisciplinary team, the DSN provides expertise in diabetes care for people with diabetes, their families and carers, as well as supporting other healthcare professionals in the care they provide.

DSNs are crucial in supporting people towards self-management of their diabetes. They play a vital role in preventing expensive complications, in supporting people with complex needs and, critically, in providing primary care teams with specialist expertise that reduces emergency hospital admissions.

During 2009 the first workforce survey of DSNs was carried out by June James, in collaboration with Diabetes UK, to build a picture of how many DSNs there are in the UK to support people, where they work and what levels of expertise and experience they have; the results were published by Diabetes UK in May 2011.

Unfortunately, we know from the survey and through other means that the number of DSNs is reducing; in some cases where DSNs are retiring or moving, their posts are being frozen – often simply to make or support a cost saving. The survey showed that:

- Forty-three per cent of vacant DSN posts are unfilled as a result of cost-saving initiatives in trusts.
- One in five DSNs will retire by 2016, with massive spikes in retirement of staff every 5 years (Diabetes UK, 2011).

This will mean longer waiting times for specialist support, more unnecessary amputations, more people losing their sight and far poorer health outcomes. Further, this audit of 587 DSNs revealed a vacancy rate of 16%. When this is examined in relation to the estimated 1363 filled DSN posts in the UK, and assuming the same vacancy rate of 16%, this equates to 218 vacant posts across the UK; the 2011 audit is due to be published soon.

Working in a cash-strapped NHS I recently had a vacancy; fortunately, I was able to prove that this post was crucial to the service provided, given that our DSN service has recently become part of a wider mental health trust in which improvement in physical care was a priority.

Where have all the DSNs gone? I have tried to recruit a band 7 highly specialist nurse on two occasions in the past 3 months, without success. The problems I have encountered are:

- It has been difficult to find applicants with the appropriate level of skills, expertise and experience.
- Some of the applicants are below band 6 DSNs, demonstrating that there is perhaps a lack of clarity on what a highly specialist nurse is, and that to achieve this level you have to have been in a junior specialist post for at least 2–3 years.
- Some agencies are recruiting DSNs via the Internet, and providing salaries in excess of the equivalent NHS pay band.

At a time when numbers of people with diabetes are increasing, a decrease in the number of DSNs is concerning. My service is commissioned to provide a certain level of service to Enfield residents with diabetes, which means I need four nurses with the appropriate skills, knowledge and expertise to provide this. The next step is to review the skill mix within the existing team, and possibly advertise for a lower, band 6 DSN, who can then be coached and developed. This option has both advantages, such as that the person can be developed to mirror the existing philosophy, and also disadvantages, in that it takes more time and effort from the existing team to develop a junior member of the team.

I guess in the current climate I should feel fortunate that I have the funding to recruit to a vacant post, whereas many peers are struggling to hang on to posts. It is worrying that numbers of DSNs available throughout the UK are dwindling, which is only going to affect the care that is available to people with diabetes.

Have any of you had similar problems, and if so how have these been resolved?