Nutrition is core to the management of diabetes, and as such access to evidence-based dietary advice should be seen as an essential component of diabetes care. Health policy recognises that the only affordable long term option for healthcare is to engage the public and people with long term conditions to make healthier lifestyle choices and to self manage their conditions. The dietetic workforce has key skills required to meet this need.

Diabetes UK was funded by NHS Diabetes to quantify the dietetic workforce for diabetes in England. We captured a baseline measure of the work settings and activities of dietitians at service level. In October 2010, the survey was completed online by 107 dietetic service managers representing 146 Acute and Primary Care Trusts across England; many of which work in more than one trust.

This survey paints a picture of services struggling to cope with the expansion expected of their services, whilst not being afforded the resource (staff and training) to ensure that these developments are made cost-effective.

**Staffing Levels**

- The average specialist diabetes dietitians in a dietetic service in whole time equivalent is 1.85, or just under 2 full-time members of staff - below Diabetes UK’s recommended minimum staffing levels
- There is inequity in terms of the quantity of dietetic service and level of specialist service provided in Trusts across England. One half of diabetes care is provided by non-specialists
- There has been very little growth in the workforce in the last 2 years

**Quality and comprehensiveness of service provision**

- No service delivers a comprehensive range of services across all settings, and dietetic services feel unable to influence systematic commissioning
- Two thirds of services do not deliver any support to people in care homes, prisons and other institutions; nor do they routinely provide healthcare professional training
- 70% of services do no work in diabetes prevention, despite strong evidence of the impact of this on lifestyle change and prevention of diabetes
- A third of services do not provide Type 2 structured education
- Services such as “Group Education for Type 1” and “Type 1 diabetes (pumps and problem solving)” were rated more highly, with smaller gaps in provision

**Professional development**

- 43% of dietetic services state their staff spend less than 3 hours a month on continued professional development
- Dietetic managers clearly indicated that the training provision to best enhance the diabetes dietetic workforce would be postgraduate courses relevant to diabetes

Many thanks to those who responded - we have monitored feedback from respondents carefully, as we hope to improve the process when replicating this effort in the future. If you have any feedback or questions, please email these to policy@diabetes.org.uk.