

DR ROSE STEWART



What have you achieved recently in diabetes care that you are excited about and keeps you motivated?

We recently secured a business case for a full-time diabetes psychology team that will cover my entire health board. This was the culmination of over five years of evidence gathering and campaigning, it was such an achievement when it finally went through! I'm going to be leading the team and I'm really excited to demonstrate the impact that psychology posts can make.

Tell us about any involvement you have with Diabetes UK

I'm coming to the end of the Clinical Champions programme with Diabetes UK, which has been a really valuable source of development and support for me. I also sit on the Diabetes UK Council of Healthcare Professionals and the Wales Advisory Council representing psychology. More recently, I've been involved with the

development of the Diabetes UK online CPD module on emotional wellbeing. It's fantastic to see psychological health being put at the centre of CPD in diabetes.

Compose a Tweet-style comment for us about the one thing that could improve diabetes care in the NHS

We need to recognise that living with diabetes is genuinely hard and make psychological support the norm, not the exception. Also, don't try to scare people – it's mean and it doesn't work.

What's coming up next for you at work?

I've just secured a new role in my health board and I will be the first Consultant Clinical Psychologist dedicated to adult diabetes care in Wales. I'll be building a new team of diabetes psychologists and rolling out integrated psychology care for young adults across our area. I've also recently taken on a new role as chair of the National Diabetes Psychology

How did you come to be interested in diabetes?

I first started working with children with diabetes when I was doing my clinical psychology doctorate. I was really struck by how much the children and families had to contend with while still dealing with the rest of life, and how unfair it was that young people weren't able to access psychological support once they turned 18. This started what has become a passion of mine – ensuring young adults with diabetes can access the care they need to live long and fulfilling lives.

What is the best thing about your role? And the most challenging?

The best thing about my role is the people I get to work with – it's such a privilege being able to support young adults while they're working out who they want to be and what matters most to them, and being a small part of that process is incredibly rewarding. I also get to work with teams of diabetes healthcare professionals who really care about what they do and appreciate the importance of psychology – I genuinely enjoy coming to work every day. The most challenging aspect is that there never seem to be enough psychology professionals to go around! There are so many initiatives I wish I could get involved with but there just isn't the time – saying no to people can be difficult.

“It's a privilege supporting young adults as they work out who they want to be”



Network, so I'm looking forward to bringing our members together and having more of a voice in national diabetes discussions.

“ I'll be the first Consultant Clinical Psychologist dedicated to adult diabetes care in Wales ”

What do you think is the most exciting thing on the horizon for diabetes care?

I think diabetes care as a whole system is waking up to the power of psychological support. We're starting to see more psychology posts being advertised and I'm seeing lots of healthcare professionals from other staff groups, like nursing and dietetics, doing additional training in psychological therapies. I think we have an opportunity to really focus in on delivering holistic care, which will give people much better outcomes.

“ Diabetes care as a whole is waking up to the power of psychological support ”

Any tips or final thoughts to share with Update readers?

Empathy and compassion might seem like fluffy words, but prioritising these qualities in healthcare can deliver powerful results. There are lots of resources and courses that diabetes professionals can use to develop their skills, but you don't have to be a psychologist to connect with the person with diabetes you support. The most important clinical tool you have is your shared human experience.

And finally, what do you do to relax outside of work?

I live in a lovely part of the world so I'm regularly out walking with my family in the Welsh hills or attempting to run. I also have a slight addiction to *RuPaul's Drag Race* (Bimini was robbed).

Coming up in the next issue of Update...

ADA CONFERENCE ROUND-UP

Plus

- Helping patients get active – the online conference for healthcare professionals
- SACN lower carb report

Out September 2021