

Citizen Participation and Public Petitions Committee
Wednesday 10 December 2025
19th Meeting, 2025 (Session 6)

PE2031: Provide insulin pumps to all children with type 1 diabetes in Scotland

Introduction

Petitioner Maria Aitken on behalf of Caithness Health Action Team

Petition summary Calling on the Scottish Parliament to urge the Scottish Government to ensure that children and young people in Scotland who have type 1 diabetes, and would benefit from a lifesaving insulin pump, are provided with one, no matter where they live.

Webpage <https://petitions.parliament.scot/petitions/PE2031>

1. [The Committee last considered this petition at its meeting on 29 May 2024.](#) At that meeting, the Committee agreed to write to the Scottish Government and NHS Highland.
2. The petition summary is included in **Annexe A** and the Official Report of the Committee's last consideration of this petition is at **Annexe B**.
3. The Committee has received new written submissions from the Scottish Government and NHS Highland, which are set out in **Annexe C**.
4. [Written submissions received prior to the Committee's last consideration can be found on the petition's webpage.](#)
5. [Further background information about this petition can be found in the SPICe briefing](#) for this petition.
6. [The Scottish Government gave its initial response to the petition on 6 July 2023.](#)
7. Every petition collects signatures while it remains under consideration. At the time of writing, 986 signatures have been received on this petition.
8. [At its meeting on 24 September 2025, the Committee took evidence on thematic healthcare issues](#) that have been raised in multiple petitions, including this petition.

Action

9. The Committee is invited to consider what action it wishes to take.

Clerks to the Committee
December 2025

Annexe A: Summary of petition

PE2031: Provide insulin pumps to all children with type 1 diabetes in Scotland

Petitioner

Maria Aitken on behalf of Caithness Health Action Team

Date Lodged

8 June 2023

Petition summary

Calling on the Scottish Parliament to urge the Scottish Government to ensure that children and young people in Scotland who have type 1 diabetes, and would benefit from a lifesaving insulin pump, are provided with one, no matter where they live.

Previous action

We have raised this issue with our MSP, Edward Mountain, and also met with him personally to discuss this issue of inequality for access to the monitoring devices for diabetic children in Highland areas.

Background information

Scotland has more than 327,000 people with diabetes, of whom 10% have type 1 diabetes. Almost 13,500 people died from diabetes in 2020; this is a major concern. People need assurances that they will have equitable access to monitoring devices to help manage their diabetes and prevent injury or death.

There is currently a postcode lottery with the provision of vital continuous monitoring pumps for children with diabetes. Some Scottish NHS Boards provide the pumps and have no waiting lists for children with type 1 diabetes, while others have only a 2 or 3 month wait.

NHS Highland has waiting lists for children up to 3 years. NHS Highland currently has 25 children waiting for a diabetic insulin pump and only provide funding for 8 pumps a year.

There are currently 167 children diagnosed with type 1 diabetes in NHS Highland areas; Caithness itself has an average of 20 children a year diagnosed with type 1 diabetes.

This indicates an equity issue for children receiving lifesaving diabetic insulin pumps in the NHS Highland area.

Annexe B: Extract from Official Report of last consideration of PE2031 on 29 May 2024

The Convener: Our next petition is PE2031, which has been lodged by Maria Aitken on behalf of the Caithness Health Action Team. It calls on the Scottish Parliament to urge the Scottish Government to ensure that children and young people in Scotland who have type 1 diabetes and would benefit from a life-saving insulin pump are provided with one, no matter where they live.

I am reminded that that was a key issue in the very first session of Parliament in which I was elected, from 2007 to 2011; it is always intriguing to see how things develop. At that point, insulin pumps had just come on the scene, and we were very keen to have them made available through the NHS.

I welcome again Edward Mountain, who has remained with us since our earlier discussion on the A9 inquiry as he has an interest in this petition. I will invite him to say a few words in a moment.

The committee last considered the petition on 20 September 2023. At that time, we agreed to write to Diabetes Scotland, the Insulin Pump Awareness Group and the NHS regional health boards. The committee has received responses from eight of the 14 health boards, copies of which are included in our meeting papers.

A number of the responses refer to utilising additional Scottish Government funding to increase the number of children and young people who are accessing insulin pump therapy and the need for further Scottish Government funding to support on-going staffing and resource requirements that are now necessary to meet the demand for insulin pump therapy. It is also the case that, since the third session of Parliament, from 2007 to 2011, the incidence of diabetes has continued to increase dramatically within the population.

We have received a response from Diabetes Scotland that highlights the benefits of diabetes technology for people with type 1 diabetes, which include the improvement of blood sugar management and a reduced risk of complications such as stroke, eye damage and kidney disease. The response draws our attention to the “Diabetes Tech Can’t Wait” report, which Diabetes Scotland published in November last year. The report includes a number of recommendations to the Scottish Government and to health boards to support the faster roll-out of diabetes tech, with the aim of ensuring that 100 per cent of children and 70 per cent of adults living with type 1 diabetes are able to use hybrid closed-loop tech by 2030.

Before I invite the committee to share thoughts on how we might proceed, I invite Edward Mountain to comment.

Edward Mountain: Thank you, convener. At the outset, I highlight that Caithness Health Action Team strives hard to ensure that healthcare is delivered across the Highlands, but particularly in Caithness, from where it is more difficult for people to get to Raigmore and the centralised health service that is currently run by NHS Highland. There is no doubt that, up there, people feel isolated from that healthcare,

as it can take at least an hour and a half under blue light, and probably two and a half hours under normal driving conditions, to get to it.

I remind the committee that, in 2023, extra money was given by the Scottish Government, and NHS Highland chose to use it for closed-loop therapy mainly for adults. Some money went to paediatric services, but there was a concentration on adults and, consequently, some children missed out. As the petitioner has made clear, there are approximately 25 children across the Highlands waiting for a diabetic insulin pump. My estimate of the cost of the pumps alone is about £75,000, which is not a huge amount of money, although there are some ancillary costs involved, as the convener has made clear: the costs are not only from the equipment but from the staff.

Providing the pumps would make a huge, huge difference to children as they come to terms with the diabetes that they must face, sometimes not fully understanding its effects. It would not require much additional money to ensure that all the children in the Highlands have insulin pumps. In fact, it would come at less than the cost of some of the administrative directors who sit on the board of NHS Highland. I therefore think that the committee could encourage NHS Highland to explain where the funding—the extra money that was given to the Government—went originally, why children were not made a priority and whether there are additional funds, with a mere £75,000 needed to provide pumps for all the children.

I will leave it to the committee, but I will just end by saying that it is difficult to overstate how remote people in the Highlands sometimes feel to healthcare, which is centralised. Giving people the ability to manage their own treatment would be truly revolutionary.

The Convener: Are colleagues content to embrace Mr Mountain's suggestion? Are there any other suggestions that the committee would like to add?

I see that we have a suggestion. It is not from a member of the committee, but I am delighted to see Clare Haughey with us this morning. I am happy to invite you to comment in any way, Clare.

Clare Haughey (Rutherglen) (SNP): Thank you for your indulgence in letting me speak on this petition, although I was not intending to. I draw the committee's attention to a written question that was answered yesterday, S6W-27895, in which I have a constituency interest. The written answer may respond to some of Mr Mountain's asks. I am happy to elaborate if that helps. The Minister for Public Health and Women's Health, Jenni Minto, confirmed that,

"this financial year, up to £8.8 million of funding will be made available to expand access to diabetes technologies in Scotland. The focus will primarily be on providing access to all children that want Closed Loop Systems, but will also allow us to continue increasing access to adults."—[Written Answers, 28 May 2024; S6W-27895.]

Perhaps that might assist with the petition.

The Convener: I shall not wander round the room asking for party contributions, but I thank Clare Haughey for advising the committee of that. We will seek confirmation from the Government, as that points seems directly to add to our consideration of the issues that are raised in the petition. I suppose that we could prompt that by writing to the Scottish Government in response to Diabetes Scotland's "Diabetes Tech Can't Wait" report, asking what specific funding would support the statement that the minister has made. Are colleagues content to do that? I again thank Clare Haughey for drawing that ministerial answer to our attention.

Foyso Choudhury: Could you add something? Perhaps you could ask the Scottish Government whether the funding will be adequate, sustainable and recurring. I understand that Lothian NHS Board is currently having to restrict access to insulin pumps and hybrid closed-loop technology for adults.

The Convener: We can certainly ask the Government to confirm the sustainability of any funding that it is making available.

Foyso Choudhury: We could also ask how much each health board will be receiving specifically for insulin pumps.

The Convener: Is there anything else? I do not want to make a dripping roast, saying yes and then having another thing sprung on me. Thank you, Mr Choudhury.

Are members content to incorporate those suggestions into the representation that we make?

Members *indicated agreement.*

Annexe C: Written submissions

Scottish Government written submission, 26 June 2024

PE2031/L: Provide insulin pumps to all children with type 1 diabetes in Scotland

I refer to your letter of 31 May 2024 seeking our response to the Diabetes Scotland 'Diabetes Tech Can't Wait' report. The Committee has asked for further information about the funding provided to support the resource and capacity required to achieve 100% of Type 1 diabetic children using hybrid closed loop technology by 2030; information on how much of the £8.8 million of new funding each health board will receive; and the sustainability of funding provided to increase access to diabetes technologies.

As highlighted in our previous response, diabetes is a priority for the Scottish Government, and we are committed to improving the care and outcomes for everyone living with diabetes. Our aim is to ensure that everyone with Type 1 diabetes in Scotland who would benefit from these important technologies have access at the earliest opportunity.

In our previous response, we informed the Committee that between 2016 and 2021 we invested £15 million of additional funding, specifically to support the increased provision of insulin pumps and CGM. A further £14.6 million was allocated in January 2022 to support increased access to these diabetes technologies as well as the new emerging CLS. This funding was in addition to local budgets and NHS Boards are expected to continue to fund provision locally to meet the needs of their local populations.

New funding for 2024 to 2025 and support for children's access to technology

As the Committee are aware, on 28 May 2024 we announced that £8.8 million of funding will be made available in 2024 to 2025 to expand access to diabetes technologies. This funding will support the increase in access for all children and young people in Scotland with Type 1 diabetes should they wish to have it. It will also allow us to continue to increase access to adults. This funding will also allow for the development of an innovative and sustainable care model which will have a digital focus.

This investment will specifically support new access, i.e. those people with existing tech access will still be covered by local budgets. The vast majority of this funding will be used on new kit, but it will also cover the costs of the national onboarding team based at the Centre for Sustainable Delivery to ensure there is additional capacity for delivery.

Allocation of funding

The new investment will allow the development of a national pathway, so for now we are not allocating funding directly to NHS boards. The plan for this phase is for funding to be held centrally and allocated based on patient need, with a focus on equity of access to technology for people with Type 1 diabetes across Scotland.

We will be encouraging all NHS Boards to utilise the national onboarding team as well as their own local diabetes clinical teams, to enable them to reduce waiting times. We are confident delivery to all children will be achieved within 18 months but it is important to recognise there are some factors (including availability of stock) which may mean this extended to 24 months.

We will soon be commissioning an executive group with key stakeholders including diabetes clinicians, managed clinical networks, Diabetes Scotland and people living with diabetes to identify the most effective future pathway for people with Type 1 diabetes.

Long-term sustainability of funding

The Scottish Government can confirm that the new funding is planned to be recurring. Prioritisation will need to take place in the 2025 to 2026 budget to make provision for this, however we understand the recurring nature of this treatment and therefore funding must follow that.

It will not be possible to deliver CLS technology to all those that want it within one year. By spring next year, we will develop a full business case for long-term investment in diabetes technology. We will also continue to develop a sustainable infrastructure to ensure we can deliver at pace and scale. This will require collaboration across all aspects of diabetes care and from industry partners.

It is important to note that the pace of delivery will be dependent on the prices secured from industry.

We understand there is still a long way to go to ensure everyone that wants access to this technology gets it, but I hope this information provides the Committee with assurances that the Scottish Government is committed to increasing access to diabetes technologies to all who would benefit.

Clinical Priorities Unit

Healthcare Quality and Improvement Directorate

NHS Highland written submission of 7 October 2024

PE2031/M: Provide insulin pumps to all children with type 1 diabetes in Scotland

Please can I respond to your enquiry: “to seek further information on how additional funding from the Scottish Government for insulin pumps and diabetes technologies was allocated across adult and paediatric services to support increased provision of insulin pumps” as follows.

Following the receipt of additional Scottish Government funding, the majority of the children in the Highland HSCP area now have a pump, are on the pathway to having one or have declined to have a pump fitted. There are 15 patients out of our total clinic population of 122 not on a pump or enroute to receiving one. Of those, three are newly diagnosed in the last month, one has just moved to the area; and the

remaining 11 patients have declined a pump at present. We will continue to work with them and their families so that they have all the information they need to consider this as an option for the future.

Patients of all ages from Argyll and Bute (A&B) receive pumps from Greater Glasgow and Clyde and we get a recharge every year based on activity. All of our patients get pumps and monitors, new and replacement. The HSCP has invested in diabetic devices in addition to the Scottish Government allocations to ensure that this can happen. I have assurance that any child who wants one in A&B is provided with one.

I trust that the above answers your enquiry. Please let me know if you have any other queries.

Yours sincerely

Fiona Davies

Chief Executive