



Based in an area of acute deprivation, with a diverse BME and Eastern European community, our practice nurse and pharmacist team manage chronic disease. We never hit HBA1c **QOF targets and The National Diabetes Audit shows 50% of our** patients being poorly controlled. With long waiting times, and more than 1,000 diabetics on the practice register, group consultations were an opportunity to: improve outcomes and access, engage patients in new ways, integrate social prescribing and improve staff experience:

"All I do all day is diabetes! I'm fed up saying the same thing. Patients don't seem to listen. Why do they bother coming?"

#### **OUR GROUP CONSULTATION DESIGN**

Pharmacist or practice nurse, supported by a non-clinician (facilitator), ran a total of 4 day time group consultations a week for adults living with Type 2 Diabetes, replacing their annual reviews and follow up appointments.

Patients were informed that the practice is providing planned care this way and why from the start.

Prompted by the Results Board, patients identified questions for their clinician, which were then answered in 1:1 discussions within the group setting.

# **OUR RESULTS BOARD**

- Clinician time efficiencies of over 300% realised within 8 weeks (now introducing evening) sessions)
- Clinician time freed to support patients with more complex needs
- More appointments available in 1:1 clinics; improved access for all patients
- Urgency to fill clinician vacancies reduced
- Practice planning to employ a group consultations programme and session facilitator

### **CLINICAL IMPACT**

- Too early to measure change in biometric
- Patients are reporting weight loss
- "I can buy an off the peg suit for the first time in years"

# **PATIENT ENGAGEMENT**

- Growing attendance 4 sessions a week to meet demand
- Powerful peer learning and support with more acceptance of lifestyle changes required

# **EXPERIENCE OF CARE**

- Patients say they feel more connected; less isolated
- Patients report learning more compared to 1:1



consultations, including improved understanding of their diabetes and how to manage it

### **PSYCHOSOCIAL IMPACT**

- Support and friendships forming quickly between patientsPeople now looking to
- attend social prescribing initiatives together whereas previously they said they wouldn't have gone on their own

"Making group consultations routine quickly normalises the practice, and shows we are serious about behaviour change and improving outcomes. Collaboration with our users stops them being our patients"

For more information about this programme, contact:

Alison Manson Email: alison@groupconsultations.com Tel: 07540 969876

www.groupconsultations.com

