

Adults living with Type 2 Diabetes in primary care

General Practice adult diabetes care

“I wouldn’t give up my group consultations for anything..”

WHAT WE DID

OUR CHALLENGE

Based in an area of acute deprivation, with a diverse BME and Eastern European community, our nurse and prescribing pharmacist team manage chronic disease in our practice.

We never hit HBA1c QOF targets and The National Diabetes Audit shows 50% of our patients were being poorly controlled. With long waiting times, and more than 1,200 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.

OUR GROUP CONSULTATION DESIGN

Pharmacist or practice nurse led, supported by a non-clinician facilitator, ran a total of 4 daytime group consultations per week for adults living with Type 2 Diabetes, replacing their 1:1 annual reviews and follow up appointments.

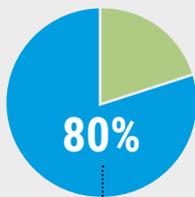
Patients were informed that the practice is now providing planned care this way and why from the start.

Prompted by the Results Board, patients identified questions for their clinician, which were answered in 1:1 consultations in front of others within the group setting.

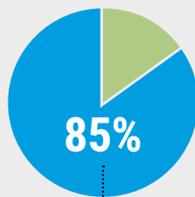
WHAT PATIENTS TOLD US ABOUT GROUP CONSULTATIONS



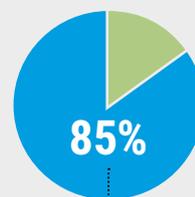
of patients report feeling more listened to



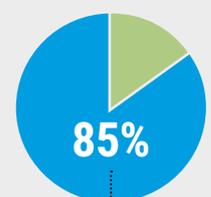
report having a better understanding of their condition and being more able to cope and keep themselves healthy



report having improved access



report having more time with clinician



would recommend group consultations to friends or family

WHAT CHANGED AND IMPROVED?

EFFICIENCY GAINS

- Over 340% clinician time efficiencies realised within 8 weeks (the team is now expanding clinic schedule to include evening sessions)
- Clinician time freed to support patients with more complex needs
- More appointments available in 1:1 clinics; thus improving access for all patients
- Pressure to fill two long standing clinician vacancies is now reduced
- Practice planning to employ a group consultations programme and session facilitator

CLINICAL IMPACT

- 70% of patients had a reduction in HbA1c
- 61% of patients had improved blood pressure

PATIENT ENGAGEMENT

- Growing attendance – we are now expanding from 4 sessions a week to increase uptake
- Powerful peer learning and support with more acceptance of need for lifestyle change

EXPERIENCE OF CARE

- Patients say they feel more connected and less isolated
- Patients report learning more compared to 1:1 consultations, including improved understanding of their diabetes and how to manage it

PSYCHOSOCIAL IMPACT

- Supportive friendships are forming
- Patients are overcoming psycho-social barriers to change together e.g. grief
- Patients are engaging with local social prescribing and report they wouldn't have gone to events 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”