EDUCATIONAL ADVISORY GROUP 4th ANNUAL REPORT TO GRAMPIAN DIABETES MCN (2013)

Grampian Diabetes Education Advisory Group (GDEAG)
This group, established in 2005, continues to meet for 2 hours on a quarterly basis in March, June, September and December. The current membership consists of Linda Caie (Regional Diabetes Nurse Manager), Kirsty Maclennan (Clinical Psychologist), Wendy Watson (Diabetes Consultant), Gordon Wilson (General Practitioner) and Ken McHardy (Diabetes Consultant & Assistant MCN Clinical Lead) who chairs the group. We are grateful to Sandra Wilson (Diabetes Specialist Nurse) who served on the group until the middle of the year. The group is currently supported by Andrea Salvona and Robert O’Donnell, MCN Administrators. The Chair continues to participate in the activities of the National Diabetes Education Advisory Group of the Scottish Diabetes Group.

The main business at GDEAG meetings is to discuss the initiation or maintenance of proposed or ongoing educational activities. Anyone involved in the diabetes community within Grampian who wishes to discuss any professional educational project is welcome to join a meeting by prior arrangement to ensure that time is allocated on the agenda to discuss their area of interest. It often needs restating that this is an advisory group and, as such, has no intrinsic resource and no mandate to deliver the education on which it advises. All GDEAG group members have, however, considerable experience of, and responsibility for, educational roles within their work and accordingly many have individual inputs to professional education which are substantially independent of their functions as group members.

In the past year, 4 meetings were held according to standing arrangements and a standardised 'Action Note' was produced as a record of each meeting. Robert has continued to maintain and develop the valuable database of educational activities. As per last year, the report has been produced at the end of the calendar year for submission to the first MCN Board meeting of the following year. We have been mindful of the requirements of the 2010 Diabetes Action Plan and our extended team continues to work on several education projects funded by the Scottish Diabetes Group. The report of the Short Life Working Group on Type 1 Diabetes was adopted by the MCN Board early in 2013 and will contribute substantially to our strategic direction over the next year or two.

Succession planning is a matter we are taking seriously with our GP representative leaving the committee at the end of 2013 and our Chair approaching retirement. Discussion is under way as to how to sustain the group into the future, including its participation in national education discussions.

Summary of Professional Diabetes Educational Activities
As in previous years we have attempted to produce an inventory of current or recent educational activities. This record relates to initiatives into which the Education Advisory Group or its members have had some input. They include a broad variety of courses, workshops, coaching sessions and updates which are specifically activities for the education of diabetes professionals, sometimes directed at specific professional groups, or to others involved in provision of service to the public where knowledge and understanding of diabetes is considered to be important.
1. Diabetes Professional Conference
The 8th annual Grampian Diabetes MCN Professional Conference took place on 11th September and was widely judged to be a highly successful event, attracting around 200 presenters, sponsors’ representatives and delegates comprising mainly practice/community nurses and general practitioners. As in previous years, all elements in the programme rated highly on evaluation with particular enthusiasm for the workshop elements. Each delegate could attend 3 workshops with up to 9 being offered at each workshop session from a total of 20 different topics available for selection. The guest lecture was given by Dr Andrew Murray, lately the Scottish Government’s first fitness and exercise lead and we once again had a presentation for Professor Sir Lewis Ritchie, Director of Public Health. A highlight, once again, was a plenary session including contributions form a patient with diabetes and the mother of a teenager with diabetes. The educational material offered, networking opportunities and the sense of belonging to an inclusive and mutually supportive regional diabetes team were once again realised and appreciated.

2. New Type 1 Diabetes Pathway Workshop
This successful event was held in Aberdeen in November as follow up to the work of a group working on the topic for the past 18 months, and influenced by the report of the Short Life Working Group on Type 1 Diabetes. A preliminary presentation had been made at the postgraduate medical meeting earlier in the year and the workshop, which was attended by 30+ dietetic, medical and nursing colleagues within the specialist team, took forward sharing and understanding of the proposals with agreement to start implementing some of the new proposals immediately. Work will be ongoing in 2014 to further develop services for those new to type 1 diabetes.

3. Change to Insulin Courses
1 day course. Run approximately twice a year depending on interest from health professionals. Up to 12 delegates per course. Various venues across Grampian. Multidisciplinary courses for primary and secondary care teams. Provide information and support for starting Insulin in Type 2 patients. This year 14 health professionals have attended. Running for around 5 years with over 240 attendees to date. Pharmaceutical sponsorship for catering.

4. Change to Insulin Courses : Refresher sessions
This half day session for primary care staff consists of general update of insulin therapies and new medications including GLP1 agonists. Case studies are used to encourage discussion. 7 delegates attended.

5. Diabetes Primary Care Outreach Project
This programme has continued following its inauguration in 2006. The mid-2012 census indicated that 21 practices across Grampian were having regular scheduled visits (approximately 66 scheduled visits/yr) on a 3-6 monthly basis from one of 7 different senior diabetologists accompanied by a DSN with various additional regular or occasional visitors including dietitians, podiatrists, clinic nurses and a health psychologist. Lack of trained staff, recurring delays in authority to recruit, and limited available time, which has been further confounded by focus on pressures relating to insulin pump therapy and acute/general medicine responsibilities, have conspired to delay the aspirational growth of this programme which nonetheless is increasingly seen as useful and successful where it is in place. Practice teams participating generally include at least one GP and Practice Nurse, but larger groups of medical and nursing staff participate in some centres. Meetings consist of practice-based,
needs-led discussions around generic or case-specific aspects of diabetes management of immediate relevance to the practices thus combining multi-professional staff development with direct input into clinical management. There is continuing hope that the service may continue to expand this activity in support of additional practices wishing to embrace it.

6. An Introduction to Using Behavioural & Cognitive Behavioural Approaches to Encourage Self-Management (Adults)
This is a half day introduction to modern behavioural and cognitive behavioural approaches. The aim is to help health professionals understand barriers to better self-care and using this knowledge to think about potential intervention techniques. This is typically delivered to groups of staff in one profession. Over recent years, this course has been delivered to 83 GPs; 15 podiatrists, and 32 dieticians. It was also delivered at a national diabetes conference to 30 delegates from different professions, and to 64 local dietitians in training.

7. Encouraging Self-Management: Behaviour Change Strategies (Adults)
This 1 day course running around four times per year, and open to all primary and secondary care clinicians working in diabetes, has been attended by 44 clinicians. Run initially by Dr Andy Keen, Health Psychologist, it integrates modern behavioural therapy theory and practice using case-based group work and discussions. This has also been delivered to 67 local dietitians in training, 30 health psychologists in training, and 26 professionals studying on the Warwick course. Dr Kirsty Maclellan, clinical psychologist, is taking this forward.

8. Encouraging Self-Management: Cognitive Change Strategies (Adults)
This second 1 day course, similarly held around four times per year and accessible to all health professionals in primary and secondary care working in diabetes, has been attended by 57 clinicians over the past couple of years. Using a similar case-based interactive format to the behavioural change course, this course based on the cognitive behavioural therapy five areas approach was also run initially by Dr Andy Keen, Health Psychologist. This has also been delivered to 30 health psychologists in training at a Scotland-wide event. Dr Kirsty Maclellan, clinical psychologist, is also taking this forward in coming years.

9. Paediatrics: Behaviour Change Level 1
This course runs as a half day workshop and has a child and adolescent developmental focus. It places the difficulties faced by young people and their families in managing effectively diabetes in a developmental context. The workshop focuses on effective communication skills and other assessment techniques aimed to identify underlying problems with self-care (e.g., functional analysis). It is interactive and incorporates clinical scenarios to facilitate experiential learning. Over the past few years 31 health professionals from the local diabetes teams and RACH have attended this course, which is run by Dr Corrie Darbyshire.

10. Paediatrics: Behaviour Change Level 2
This workshop, which is also run by Dr Corrie Darbyshire, builds on the knowledge and skills developed in the level 1 workshop to help young people and their family address difficulties with diabetes self-care through the use of behaviour change techniques, including those recommended within SIGN 116 for use with children and adolescents (e.g. problem-solving). The format is similar to Level 1 in that it incorporates both theory and clinical scenarios to facilitate development of the skills
discussed. Over the past year, 32 health professionals have attended this course, which runs over half a day.

11. Helping Young People to Improve their Diabetes Self-Care: What works and what doesn’t!
This workshop is aimed specifically at helping those who work with young people aged between 14 and 20 who are passing through important transition and developmental stages of life. It focuses on the specific challenges and issues pertinent to this age range, whilst considering various models, strategies and service developments that can be implemented to engage young people in diabetes self-care. It is run by Dr Corrie Darbyshire and over the past year or two 17 health professionals from the Diabetes Centre and ARI have attended this course.

12. Staff Development (1-1): Psychological Strategies in Diabetes Management – Paediatric Diabetes Specialist Nurses
Dr Corrie Darbyshire provides on-going individual fortnightly support for one hour to two paediatric diabetes specialist nurses. The aim of these meetings is to facilitate the transfer of knowledge gained at workshops into routine clinical practice. As is the case in the staff development groups, this occurs mainly through discussions of problematic cases.

13. Staff Development Groups: Psychological Strategies in Diabetes Management
These consist of small group sessions for health professionals (about five or so) meeting monthly. Groups have been established to date for Diabetes Registrars and Community Dieticians. A further multi-disciplinary group has been established recently in Moray. They build on the knowledge and skills gained at the workshops on behaviour and cognitive change strategies (7 & 8 above), and are open to all those who have completed these. Participants further integrate cognitive and behaviour change skills into their practice by reflecting on clinical cases. The Community Dieticians are soon to set-up and lead their own staff development groups, so this specific group will change its focus to one in which supervision (of psychological skills development) and group-facilitation skills are supported and developed. This is run by Dr Andy Keen.

14. Introduction to Teaching & Training for Diabetes Healthcare Professionals (aspirational)
Course comprising 2 full and 2 half day sessions over 5-6 weeks. Places offered to 12 delegates from multiple disciplines within hospital or community based diabetes specialist teams. Completed by 44 delegates by the end of the 4th course held late in 2009. In-depth, participative course on educational practice and theory using a wide range of teaching methods and media. Pharmaceutical sponsorship. Poster presented at Association of Medical Education in Europe Sep 2010. Competing pressure have again prevented this locally developed course being delivered; its usefulness is not in doubt and it is hoped that there may be an opportunity to repeat or adapt it in 2014.

15. Conversation map training and follow up sessions
45 participants have completed a half day training session to use the conversation map tool within Grampian to date. 1 half day session for trained facilitators was held in May of this year 16 delegates attended. No direct resource.
16. Paediatric Diabetes in Moray
On going weekly drop in education sessions to cover diabetes in patient management were offered to staff throughout the year as unfortunately an annual update was unable to go ahead in Moray due to absence of Consultant.

17. Lilly GP Scholarship
13 half days over 9 months (Jan – Oct) held annually subject to funding; around 9 participants per class. Course for GPs. Mix of workshops, presentations, shadowing, practice-based projects and private study. Backfill funding has been offered to facilitate release from Practice. The 15th course was completed in early October 2013 with 134 ‘graduates’ now having completed the programme. Pharmaceutical sponsorship continues to be problematic but £7.5k was received from Lilly in 2013. This has allowed plans to proceed for a 16th course in 2014 and 8 delegates have already been recruited to the course commencing at the end of January. Succession planning is an issue with retirement of the Course Director in 2015 and advance notice that there will be no sponsorship from Lilly for the foreseeable future. [There were 32 former/current Lilly scholars at the Professional Conference in 2013 including at least one representative from each class since it began in 1999, and comprising over 60% of all GPs attending.]

18. Warwick Certificate in Diabetes
This course is primarily for nurses in primary and community care sectors. 26 delegates commenced the 9 month course in September 2012 and 24 delegates completed the course in June 2013. This is a distance learning programme with facilitation of 6 study days, mentorship and support from local diabetes team. Pharmaceutical sponsorship funded the delegates’ fees for this course.

19. Warwick Optimising Glycaemic Control Course
The course is for experienced nursing staff in primary care. This is a distance learning programme with 3 days face to face contact and support from local Diabetes Nurse Specialist Team. 22 delegates commenced the course in October 2013. Pharmaceutical sponsorship funded the delegates’ fees for this course.

20. Diabetes Update for Trained Nurses
The course is offered to registered nurses to manage and support people with diabetes. It is run over one day and is delivered in different venues throughout NHS Grampian. This year we have run the course 3 times with 21 delegates attending. To date it has run 9 times with 70 delegates attending these sessions. No direct resource.

Various sessions have been held across NHS Grampian for the above. A total of 17 sessions have been delivered with a total of 180 delegates attending. DSN led. No direct resource.

22. Diabetes Training for Registered Nurses in the acute service,
These sessions are needs-based training sessions on diabetes topics relevant to those involved in in-patient management working in areas where diabetes is not a primary focus. DSN lead. This year 29 nurses attended these sessions. No direct resource.
23. Annual Diabetes Update College Staff and Students
Update session on general diabetes management held at Aberdeen College. In total
26 participants comprising of teaching staff and class support workers.

24. Student Nurse Training
These two hour sessions provide nursing students, who are on community placement
in Aberdeen City, with an opportunity to discuss diabetes and its management. Two
sessions were available with 61 students attending.

25. Care Home Training
This full day session was developed to focus on the training needs of unregistered
care home staff. It provided an overview of diabetes care and management to
increase understanding of diabetes, its effects and the special care needed for care
home residents with diabetes. Three sessions were offered throughout Grampian.
One in Aberdeen, Aberdeenshire and Moray a total of 45 staff attended. The
feedback provided was very positive indicating that the session more than met
expectations’. No direct resource.

26. Dental Staff Training
General overview of diabetes. Demonstration and practical session on blood glucose
monitoring for use in emergency including hypoglycaemia and how to treat. Two
sessions were held in Grampian Aberdeen and Moray a total of 75 delegates
attended.

27. Undergraduate Medical Students
Our extended multi-disciplinary team offer a variety of teaching and learning
opportunities for the students in relation to diabetes management. Practical skills
required for self management including blood glucose testing, injection technique
and foot screening are provided. Case presentations are facilitated by patients and
staff to increase students’ understanding of living with diabetes. As well as raising
trainee knowledge of, and interest in diabetes, these sessions also encourage staff
members to realise their important role in training medical professionals.

Conclusion
As in every year since its inception, the GDEAG has continued its advisory role in an
attempt to promote delivery of high quality, appropriately-focussed and progressive
training for diabetes health care professionals in Grampian. By developing its
administrative capability it aims to increase its utility in the collection of data for the
MCN that could provide responses to any local or national accountability tests. A
major future challenge will be the enhanced focus on patient education and how this
is counted. There is also a sustainability challenge for the group in relation to its
acute need for succession planning during 2014.
The Group remains happy to discuss any of the content of this report, or matters
relating generally or specifically to current and future diabetes education provision
for colleagues and patients in Grampian.
We wish to recognise and acknowledge the enthusiasm and contributions of so many
members of the extended Diabetes Team in the Region in the development and
delivery of our broad repertoire of educational opportunities. Finally, we would like to
record a particular vote of thanks for Dr Gordon Wilson of Gilbert Road Medical
Practice in recognition of his work on behalf of the Group over the past 8 years and
to wish him well in his (partial) retirement.

GDEAG December 2013