

Community Engagement in Primary Care

Session 2 – Community Engagement Case Studies Presenters: Suzanne Thomson, Lynn Anderson

Attending - 60 participants including staff

Diabetes Peer support groups - Suzanne Thomson

Questions

Are these folks with Type 2 diabetes? And do they have an opinion on MDMW (My Diabetes My Way)?

Yes, just type 2 diabetes – group mainly older – just the way it's worked out. Many of them are fans of MDMW – they find it useful to track their progress.

Do you link with peer support groups in other Health board areas? Perhaps Diabetes Scotland links people across the Country in this way?

Not yet but will be linking with Fraserburgh at Christmas time, also we do link up with Aberdeenshire as well as Aberdeen City.

What platform do you use for running your virtual groups?

Microsoft Teams

How have older people (over 70) found linking in via platforms like Zoom?

Our older people benefitted from a staff member who could help them get online - and we then found people in their 80s helping others to get connected.

In terms of engagement, especially with some people being unable to interact online, how do you manage this and maintain a good level of interaction for these people?

Some of core group who are in their 70s almost 80s didn't want to get involved on the internet so we talked to them on the phone. This has then encouraged them to get online for the first time.

We produced a short guide to support people to use Teams.

We are part of the wider diabetes project group where any topics that are raised at the peer support sessions are discussed, if people want to learn more we can get a speaker to come along.

Are you able to share some of the success with support groups in other areas? If so, how do you do that? I'm thinking that for groups that aren't so strong in terms of attendance there could be some learning there for them!

We share success online, colleagues from within the health and social care partnership can access this information at any time and get in touch if they would like to know more.

Comments and feedback from the chat box

- Really excellent work Suzanne and team – and other projects too!
- Western Isles has a Diabetes Peer Support Group supported through Diabetes Scotland. It's a mixed group of older and younger people and across both type 2 and type 1.
- This sounds like a great idea and I can see good links with Health Promotion Team who are unable to continue with their traditional model of engagement.
- Thank you for being mindful of our older people who are not always digitally connected!

mPower - Lynn Anderson

Questions

Do you feel people are empowered by this project?

Yes, people will go to see the GP and ask questions they may not have asked before. People feel more independent.

How do you deal with people with rare conditions where little is known, there are no treatments and re-ablement is unlikely, sometimes the prognosis cannot be anticipated?

Not sure if I have ever had a referral like this. I have had someone who signed up for a wellbeing plan and they also happen to have a rare condition. They are in the age 80 plus group so there are age related onset issues such as reduced mobility and sensory impairment. We very much use the 'What matters to you?' approach, asking them what they need to keep them safe and independent.

Has your programme been received well by other professionals? As in each profession respected as equals?

I would think so and I would hope respect is there. We have established pathways and we are looking at more.

We regularly reach out to professionals and encourage shared learning. We've used feedback from a clinical psychologist and NearMe. There has been some great learning between Scottish sites, Scottish Islands and also Ireland and Northern Ireland.

Comments and feedback from the chat box

- It's good to hear 'What matters to you?' as a standard question - not just asked during one week in June.

- Sounds like a really innovative and person-centred project - thanks Lynn.
- Equivalent in Dumfries and Galloway and in Western Isles so had national events and areas have asked if they can get this service.
- Western Isles has used this a lot to support community during COVID 19, also involved in a programme of supporting people with Blood Pressure monitoring,
- Sounds excellent Lynn! So much valuable stuff going on.

Benbecula Medical Practice – Dr Dawson (not present)

Dr Dawson wasn't able to join on the day but some questions around the use of Facebook were submitted which she answered later.

Questions

It would be very useful to get a feel for the staff input required to support the Facebook page?

Staff are able to suggest ideas for posts, feel enabled to post and to encourage others to post

Staff have suggested new ideas to keep things real and local. Our latest idea came from the children of a member of staff. They designed some health promotion pictures about wearing masks. This was very positive for the children concerned, and with permission, their poster was displayed on the page.

Posts that have been written by staff and local people get the best response over and above national information that is shared on the site.

Resource - In order to ensure there is something on Facebook most days, I spend an hour or two a week setting up posts (they can be queued) - about the same amount of time I would usually spend designing and creating waiting room displays and 'learning in the loo' material.

What about people who are not on Facebook, how can they get involved?

For people who are not on Facebook, it is really difficult to get involved. Our waiting room always has good noticeboard displays, but the waiting room is not nearly as busy at the moment.

We sometimes put information out on the radio or in the local press, but this is not nearly as immediate as Facebook. We can't meet easily, and without VC, meetings are impossible.

Our local mPower link worker recently left her post. I envisage working with mPower to overcome this to a certain extent.

What are the risks and dangers of a Facebook page and who runs it?

The risk of the Facebook page, we considered this at the start, that it would become a place for people to post complaints and discuss their clinical problems.

The group is moderated by two patients and two practice members (a GP and the practice manager). Posts are only allowed if they relate to health and care provision, we have set up some guidance for people to help them understand what should or shouldn't be posted. We also ensure that all the members are locally based.

Any complaints are managed using the practice complaints procedure and are not posted on the site. Similarly, any enquiries of a clinical nature are not posted on the site and are passed on to the practice.

If we don't post something, we respond to the poster to explain why and what will happen next. The page also makes it clear that posts are in the public domain.