

Co-Creating Health Programme

Winter 2009/10

Supporting Self Management

For people living with Diabetes and other Long Term Conditions

Over 400 studies worldwide have shown that supporting self-management can lead to dramatically improved outcomes for patients. Despite this, it remains at the periphery of most health services.

The Co-creating Health initiative aims to transform healthcare for people with long-term conditions. Through this initiative, The Health Foundation is supporting The Whittington Hospital NHS Trust, NHS Islington and NHS Haringey, along with other ambitious healthcare organisations from across the UK, to create new models of healthcare that embed self-management within mainstream health services.

Providing responsive, effective services for people with long-term conditions creates enormous challenges for health services. Healthcare professionals cannot address these challenges alone. Many people are ready to take a more active role in their own care, but they need to work in partnership with their clinicians to achieve lasting improvements in their health. This is what we mean by 'co-creating health'.

To take a more active role in their health, people need self-management skills and easier access to information about their conditions. They also need skilled support and motivation from their clinicians and as well as healthcare systems that operate very differently from those we have today.

Headline results of the local Co-Creating Health initiative to date are:

- statistically significant reductions in HbA1C and LDL cholesterol in patients participating in the Self Management Programme
- 89 percent of clinicians who have attended the Advanced Development Programme agree that they have significantly improved their knowledge of how to support patient self-management
- monthly process and outcome measures are demonstrating improvements in the percentages of consultations where a care planning consultation is taking place with increases of recorded collaborative agenda setting, goal setting and follow up on goals.

SKILL: EXPLORING CONFIDENCE IN GOAL SETTING

When people with long term conditions are making action plans towards their goals you can help them to set **Specific Measurable Achievable Realistic** Timely goals by asking how confident they are in carrying out their plan on a scale of 0 - 10. If confidence is less than a 7 the plan needs to be

readjusted to something more achievable. Remember, success with small steps is what builds confidence and leads to more changes

[If you want to learn more about these skills, why not attend the Advanced Development Programme. See back page for contact details.](#)



Participants at the September 2009 Self Management Programme held at The Whittington Hospital

Concentrating efforts in primary care

In a move to increase the concentration of Co-creating Health activity in primary care, NHS Islington developed a pilot “Supporting Self Management” Local Enhanced Service running from August until March 2010. The two practices involved are St John’s Way and Islington Central. Most clinicians from these practices received training in a shortened version of the Advanced Development Programme in August.

The experience of delivering this training has enriched the Co-Creating Health team’s learning about how the programme will be further developed for primary care.

Here are some comments from course participants from the two practices:

“I was quite sceptical about the whole ADP course; however I can see now where these skills fit into my working practice.”

“Before this course I never really thought about how I can help patients to help themselves other than using a didactic method.”

“We all have patients with chronic conditions and it can be frustrating not being able to help them make changes – so some good techniques here to help them to help themselves.”

Core Patient Group

Some of the graduates from the Self Management Programme have formed a ‘Core Group’ and meet bi-monthly. The purpose is to increase patient involvement in the Co-Creating Health initiative and to inform service development. This is an extremely valuable resource for future service improvement projects.

The practices are also encouraging their patients to attend the Self Management Programme and will undertake monthly service improvement initiatives with the aim of embedding the principles of self management into their core practice. They are taking monthly measures in the same way as other teams involved with CCH to see whether the changes being made are increasing the proportion of consultations with a collaboratively set agenda, agreed achievable goals and a record of what follow-up arrangements on those goals are. They will also be measuring patients’ ability to cope with their diabetes, to keep themselves healthy, to help themselves and assess their confidence level on a scale of 1 to 10 in managing their diabetes.

The impact of the pilot LES will be reviewed in April 2010.

For any queries about the LES, contact mary.price@islingtonpct.nhs.uk

What participants have to say about the Self Management Programme

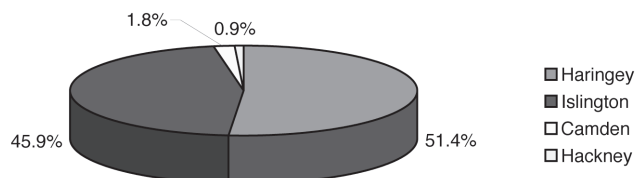
- “Everything was useful and relevant to my condition”
- “It is an eye-opener and makes me feel more confident about looking at my problem right in the face as it were”
- “Have felt very uncomfortable going to this at first, but grew in confidence with the tutors”
- “Most knowledgeable, informative, realistic, understandable”
- “[What I liked about the course was] ... meeting other diabetics with different problems, and lots of solutions”

The next Self Management Programme for people living with diabetes commences Saturday 16 January. If you would like to attend, please call the free phone number **0800 030 4225** to register

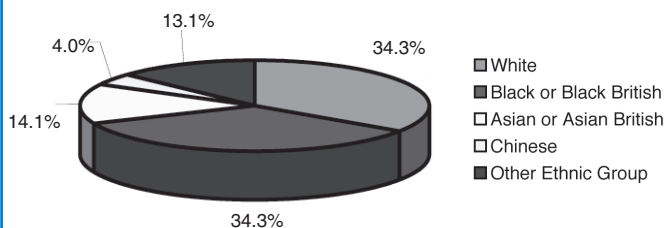
Improving the Whittington Hospital Diabetes Outpatient Clinic

Members of the Whittington Diabetes Team came together in October to look at improving the diabetes outpatient clinic for both patients and staff. Administrative, managerial and laboratory colleagues attended with clinicians, to look at the patient journey through clinic. This was the first in a series of workshops which aim to reduce wasted time and effort in the clinic (using “LEAN” principles). These are part of service improvement in Co-creating Health, a national programme which aims to enhance patient self-management

% of SMP participants who have completed 5 or more sessions by Borough (place of residence)



% of SMP participants by ethnicity



125 participants have completed the Self Management Programme since April 2008.

support in clinical services. Dr Maria Barnard, the local Clinical Lead for Co-creating Health, said: "This was a very exciting afternoon. There was a lot of positive suggestions from everyone about how we can make things better. We've got 4 quick win projects that we're already working on. Then when we come back together in November, we'll start looking at the more difficult issues - that will be the real challenge!"



Mapping the patient journey through the Whittington Hospital diabetes outpatient clinic

Positive experience at an Action Learning Set

"I was wondering how easy it would be to agree to a 'shared agenda' if my patient has a massive list of issues to discuss, especially, if they were not diabetes related.

When I put my concern to the group, someone from the group asked me, "Imagine if you were going on holiday with a friend. Imagine that you had met up in a coffee shop to discuss which sights to see when away. What would you do?"

I thought that was a brilliant analogy!

I answered, "We would draw up our lists separately and see if we have any similar interests. If we had found places that we both wanted to see, we'd plan our trip around those. If our lists were poles apart and showed completely different sights, then we would have to compromise - of course we can always cancel the holiday!"

**Elly Baker, Diabetes Specialist Nurse,
The Whittington Hospital**

Personalisation and Supporting Self Care

8 December at West Green Learning Centre

This **free** event in Haringey aims to raise awareness and promote discussion between health and social care professionals and enable them to find out more about personal budgets, self assessment framework, supporting self care/self management, personalised care planning, information prescriptions and risk assessing.

This will be a starting point for professional and practitioners to find out what culture changes will need to be made and what actions to be

taken to support effective two-way communication, negotiation and decision making in which the practitioner, patients and service users contribute to the care planning process to help them to stay healthy. All practitioner and professional from either health, social care or primary care are welcome

For more information and a booking form please contact Deborah Crawley on 020 8442 6065 or at: deborah.crawley@haringey.nhs.uk

Your Health Your Way

Is a guide that came out in April 2009 for healthcare professionals on long term conditions and self management. It outlines the value of self care/self management for individuals living with long term conditions. It provides a summary of what self care/self management might mean to individuals and what approaches might be considered in a broader health context. There are 5 key areas of self care/self management which are:

1. Information
2. Skills and knowledge training
3. Tools and self monitoring devices
4. healthy lifestyle choices
5. support networks

The guide promotes personalised care planning which is about having a discussion that addresses an individuals full range of needs and focuses on goal setting, information and support for self management. Co-Creating Health provides the essential training and service improvement support necessary for personalised care planning.

For copies you can order from www.orderline.dh.gov.uk



Dr Jonathan Riddell and Siobhan Harrington presenting on local service improvements at the Co-Creating Health National Forum in Glasgow in October 2009

Personal invites make a difference.....

In August Killick Street practice sent a letter with a course leaflet, informing all their patients with Type 2 diabetes (for longer than 1 year) to attend the Self Management Programme. The result was that 36 percent of the September/October course participants were patients registered with Killick Street.

Any practice or service wanting to do a similar mail out and wanting multiple copies of the Self Management Programme leaflet, or help with a mail out, should contact Trish Turner patricia.turner@whittington.nhs.uk

If interested in participating or finding out more about any of these programmes please phone Trish Turner, Co-Creating Health Project Manager on 020 7288 3154 or email: patricia.turner@whittington.nhs.uk or visit our website at www.whittington.nhs.uk/cocreatinghealth

Co-creating Health
— a self-management initiative

