

PEER-TO-PEER AND PARTICIPANT-DRIVEN INTERPROFESSIONAL LEARNING: PILOTING AN ONLINE INTERACTIVE NETWORK IN TYPE 2 DIABETES

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BACKGROUND

- Primary Care Providers (PCP) are the front line providers of care in type 2 diabetes (T2D)¹.
- Optimal care in T2D requires practitioners to be competent in complexities of disease management, as well as in patient communication, counseling, and education; yet, research evidence shows that many PCPs are challenged in doing so^{2,3}.
- A 2007 behavioural and performance needs assessment conducted by AXDEV Group showed that:
 - Physicians lack formal training in counselling and coaching the patient to effectively manage his/her diabetes
 - Healthcare providers feel disempowered and frustrated to confidently and competently address patients who are non-adherent
 - Lack of quality and frequency in communications between providers and patients, and between providers
 - Many patients do not feel empowered to play a significant role in the management of their diabetes

OBJECTIVE

- To develop and facilitate the evolution of an online network in T2D to enhance the communication and collaboration skills and competencies of primary care providers and their teams to improve the care of patients with T2D.

Vision

Become a comprehensive, accessible, and interactive educational resource that empowers providers, teams and people with type 2 diabetes to collaboratively manage the condition

Mission

Offer participant-driven learning environments for primary care provider teams and for people with type 2 diabetes where they can interact, exchange ideas, and engage in dialogue in the goal of enhancing communication and collaboration, and facilitating improved, consistent, diabetes self-management and adherence

References

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- Danielle Bolen S, Bricker E, Samuels TA, Yeh HC, Marinopoulos SS, McGuire M, Brancati FL: Factors Associated with Intensification of Oral diabetes Medications in Primary Care Provider-Patient Dyads: A Cohort Study. *Diabetes Care* 2008, 32(1): 25-31.
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DESIRED OUTCOMES

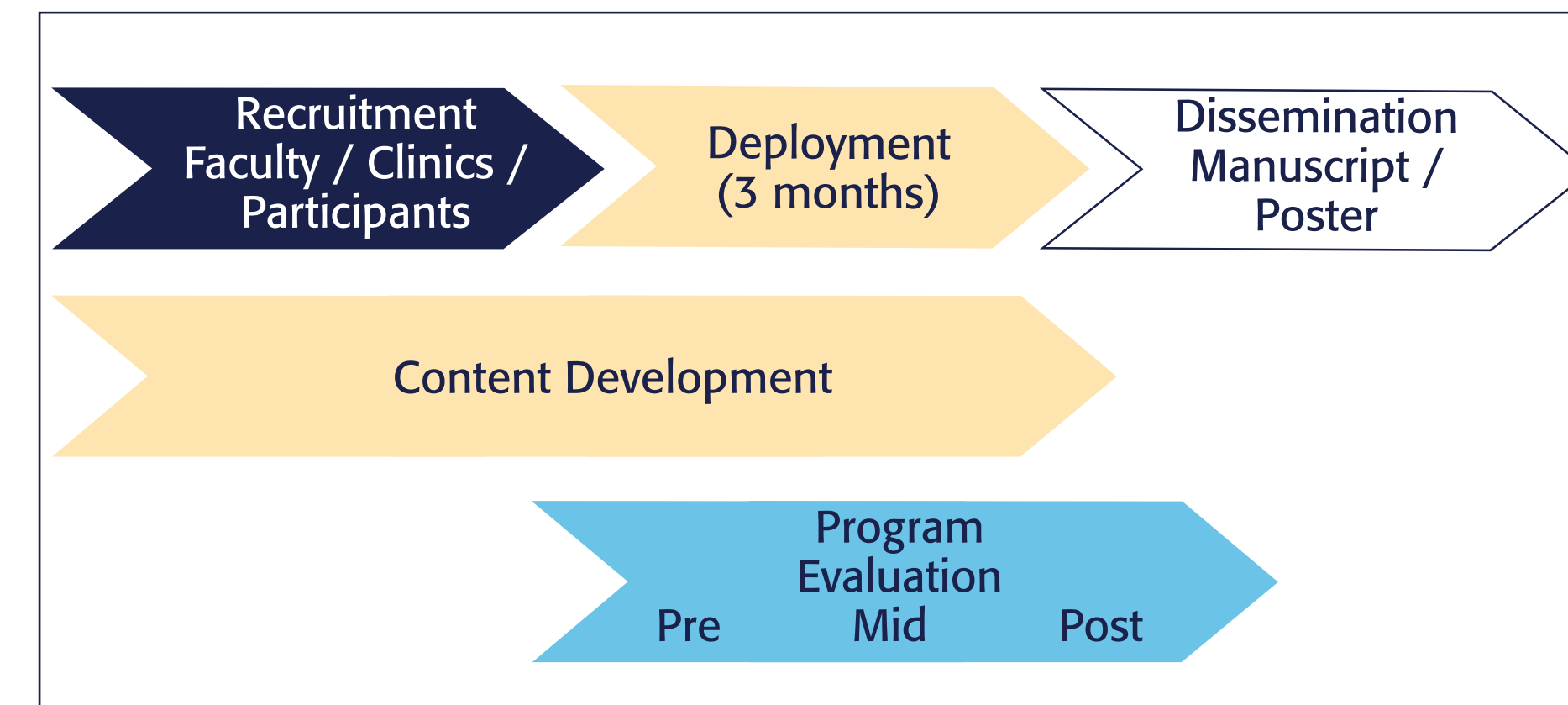
The findings of this pilot initiative should provide data on the impact of this online interactive network on the professionals, teams and patients of the selected clinics

PROFESSIONALS	TEAMS	PATIENTS
<ul style="list-style-type: none"> Increase concordance with T2D patients with regards to the treatment regimen Improve their patients' sense of empowerment and capacity to self-manage their disease, thus reducing frequency of consultation 	<ul style="list-style-type: none"> Provide clinics with performance assessment prior and after the intervention Improve the clinics' functioning by identifying the gaps and challenges hindering appropriate communication and collaboration amongst PCPs and between PCPs and patients Improve collaboration and the sharing of responsibility Become more effective at navigating patients 	<ul style="list-style-type: none"> Increase patient levels of commitment to recommended management plan Improve patient sense of empowerment and capacity to self-manage their condition Improve patient navigation through the clinic

- In addition, this pilot activity will provide:
- Insights on the feasibility of this online interactive network
 - Evidence-based recommendations regarding the deployment of a nationwide network

METHODS

A glance at the Online Network in T2D



Recruitment

- Advocacy from local key scientific leaders in Quebec
- Selected sample:
 - 4 clinics
 - Interprofessional teams of healthcare providers (n = 30-60)
 - Physicians
 - Nurses
 - Diabetes educators
 - Nutritionists, Dieticians
 - Residents

Evaluation

- Pre and post 45-minute semi-structured telephone interviews
 - 20 participants in the online interactive network
 - 15 persons with T2D selected from participating clinics
- Participants' feedback collected during mid-point session
- Web-usage statistics

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Deployment

Orientation session	Background information and introduction	
Online Network's secured web platform	Forum discussions	Peer-to-peer dialogue, exchange of ideas and practical tips
	Expert-facilitated cases	Realistic and discussion-provoking clinical scenarios
	Debate topics	Expert-facilitated discussions on topics of interest
	Webinars	Interactive sessions designed and facilitated by experts in the field
	Tools and resources	Designed to help providers address clinical challenges
Mid-point session	Opportunity for participants to provide their feedback	
Pre-Post evaluation	Assess the value and impact of the program, as well as areas for improvement	

ITEMS FOR CONSIDERATION FOR SUCCESSFUL ONLINE NETWORKS

Adequate assessment of the environment	– Ensure "best fit" between selected clinics and initiative
• Readiness / Receptivity to initiative	– Improve roll-out of initiative
• Feasibility	
• Existing initiatives already in place	
Obtaining buy-in from government bodies	– Increased receptivity of local clinics
	– Potential partnerships for deployment at a larger scale
Offering reports to participating clinics	As part of a performance improvement initiative:
	– Current performance
	– Impact of intervention on team performance and patient outcomes
	– Recommendations for further improvement
Faculty committee representative of target audience	– Increased buy-in from participants
• 2 primary care providers, 1 nurse, 1 endocrinologist	
Development of local champions	– Increased buy-in from participants
Integration of patients in evaluation process	– Ensure evaluation of program outcomes up to Moore's level 6