

Case study: Guy's and St Thomas NHS Trust

The benefits of flexible training for clinicians

The challenge

Initially we advertised the Practitioner Development Programme widely across a number of local GP Surgeries inviting GPs and Practice Nurses to register to take part. Health Care Professionals within the Diabetes Team at Guy's & St Thomas' were invited to participate in the same course. This provided a mixed group of healthcare professionals coming together from across Primary and Secondary Care, to ensure that the language that teams and individuals use about self management support language is the same across the care pathway.

The programme consisted of 3x4 hour sessions, over the course of 3 months (delegates had to commit to all 3 sessions) and was held at an off-site venue so all involved could focus on the sessions.

We found that the delegates on these courses (especially the first) were people who were already interested in self management support and collaborative working, they were the 'early implementers' which enabled us to use them as champions to encourage further delegates from their surgeries to take part in future courses.

Unfortunately one of the draw backs of this approach was that the self management support ethos was spread very thinly across the Boroughs. It was very difficult, even for a very engaged individual at a surgery, to get other colleagues involved in a more collaborative approach.

Feedback from delegates was that the course was too long and a big commitment, especially in Primary Care.

The team analysed feedback from the course and agreed that the course needed to be adapted in terms of recruitment to try and gain buy-in from whole GP surgeries and in terms of length to try and maintain attendance levels.

What we did

In primary care

We contacted surgeries where more than one delegate had already completed the Practitioner Development Programme and whom we considered

'champions', and offered to hold a course 'in-house' at their surgery for the whole team (including junior, reception and administration staff). The whole team approach supports the embedding of change within the surgery.

We offered this at a time convenient to them (usually lunch/early afternoon), and as either 3x2 hour sessions or 2x3 hour sessions, whichever was more convenient for the team.

In order for us to provide this 'tailored' approach, surgeries who wanted to participate also had to get involved in service development work to look at how the systems and processes they were using could be developed to better support people to manage their health, and we also asked them to provide our team with a list of their Type 2 patients so they could be invited along to Patient Skills Programme.

In secondary care

We advertised the Practitioner Development Programme to all Guy's & St Thomas' and/or King's College, Diabetes Teams (this includes podiatrists, dietitians etc) as flexible training sessions of either 2 or 3 sessions.

We were flexible about the venue for the training (either on or off site, according to the preference of the team involved). We found that when we were providing training to a single team (GSTT or Kings) they tended to prefer it to be held on site, whereas when we were providing it to people from different teams, they tended to prefer it to be held off site.

We ensured that all Consultants and Specialist Nurses within the Teams completed the Practitioner Development Programme. This ensured that the language and ethos of self management support were used routinely within the department. Junior staff within the team then learn the language and collaborative approach by example.

Our learning

Our learning from recruiting people to the Practitioner Development Programme and facilitating the sessions has been that 'one size doesn't fit all' and that just because one method

doesn't work, it doesn't mean another will. We have to be flexible when it comes to providing training for a wide variety of healthcare professionals.

Although we had whole teams register for the Practitioner Development Programme, via the Practice Managers, sometimes due to lack of communication internally within the surgery some delegates were unsure what they had signed up to and in some cases delegates had re-instated their clinics and were therefore unable to participate. Also holding the training in the surgery meant that on occasion delegates were called out of the sessions for urgent calls etc.

We are now in the process of trying another method of training by setting up one day events, primarily for Practice Nurses as feedback has revealed that they are the delegates who benefit the greatest from the training and who find it difficult to commit to more than one date for training, due to work constraints. This training will be held at a venue within the community, but not within an NHS property to allow for time away from the work place to fully engage with the training.