Healthcare professionals’ views on using Diabetes UK Information Prescriptions with their patients

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Introduction
The Diabetes UK Information Prescriptions are clinical tools that were developed to help healthcare professionals and people living with diabetes to make decisions together about the treatment and self-management of three important health targets: blood pressure, cholesterol, and HbA1c. Each of the three Information Prescriptions provides easy to read information on one page for people living with diabetes. All Information Prescriptions include: their last blood pressure, cholesterol or HbA1c measurement, a description of the meaning of each measurement (including an infographic), a list of actions that can be taken to reduce the risk of complications, a section for setting goals for behaviour change, and a link to the Diabetes UK website. The Information Prescriptions are incorporated within primary care IT systems and include pop-ups to remind healthcare professionals when it is appropriate to use the Information Prescriptions with a person with diabetes (e.g. when blood pressure is outside the NICE recommended target). Recently, Diabetes UK and researchers from Newcastle University worked together to conduct research that aimed to collate healthcare professionals’ views regarding the usefulness of the Information Prescriptions and any perceived barriers to their use in routine primary care.

Method
Newcastle University lead researcher Sebastian Potthoff conducted semi-structured interviews (via telephone and face-to-face) with 13 healthcare professionals from a sample of primary care practices across the UK. Participants included general practitioners, nurses, and one pharmacist prescriber. At the time of the interviews healthcare professionals had been using the Information Prescriptions for approximately 6 months. The following report summarises key findings from the study.

Findings
Layout
Initially, healthcare professionals were asked about their overall impressions of using the Information Prescriptions. They were prompted to report any positive or negative impressions regarding the layout, information content and the goal setting component of the Information Prescriptions. The goal setting component of the Information Prescriptions is intended for patients wishing to make behavioural changes that would impact on clinical outcomes. All of the healthcare professionals interviewed were positive about the design of the Information Prescriptions.
"I like the use of the typeface, I like the emboldened headlines, I like the boxes, I like the fact that it’s very easy to use, very quick to fill out.” — diabetes specialist nurse

The majority of healthcare professionals interviewed reported making explicit use of the infographics that explain the three health targets (e.g. picture of blood vessel furred up with cholesterol).

"I think a picture speaks a thousand words. So that is very helpful for people to see why they should do a behavioural change, because they can actually see the blood vessel getting furred up.” — consultant diabetologist

Clinical content
In terms of the clinical content most healthcare professionals mentioned that they found it appropriate for people living with diabetes.

"Well it’s nice and straightforward, good explanations, certainly not overwhelming the patient with information. Straightforward, I think, pitched at an appropriate level for patients.” — general practitioner

Goal setting and action planning
Towards the bottom of the Information Prescriptions there is a section that allows healthcare professionals and people living with diabetes to set and agree on goals for behaviour change. This section of the Information Prescriptions requires setting and agreeing on a date for when this change should be achieved and formulating two steps that the person with diabetes can take to achieve the goal. Healthcare professionals reported that they made regular use of this section and that they found it useful to help them engage more actively with the people living with diabetes.

"And also the bits with the goal setting, because it makes it more of a motivational interview rather than a prescriptive interview. That they’re working with the patients, and saying “what do you think, these are the healthy options that you should be doing, so how do you think you might be able to achieve them?” — nurse

Generally, healthcare professionals mentioned that they found the Information Prescriptions useful for making a shift towards shared decision-making around self-management of diabetes.

"It’s quite a challenge in itself because they very much have this perspective that you’re the doctor, you’re the healthcare professional and you’re going to sort it out for them. So it’s trying to shift that level of thinking.” — diabetes specialist nurse

Another feature of the Information Prescriptions is that they are installed on supported IT systems (e.g. EMIS and Vision) and that they include automatic pop-up reminders that notify healthcare professionals when a patient falls outside the NICE guideline outcome targets for a specific health target (i.e. blood pressure, cholesterol, and HbA1c). Although, a few healthcare professionals reported initial difficulties with getting the Information Prescriptions installed on their IT systems, once the Information Prescriptions and pop-up reminders were installed they were perceived as very useful.

"Well for me it was the integrated prompt in IT, by far that was the most useful thing that something is popping up for every diabetes patient I see asking me if an information prescription is appropriate.” — general practitioner
Barriers
Healthcare professionals reported a number of barriers to the usage of the Information Prescriptions, which included: patient lacking motivation, not having built sufficient rapport to address behaviour change with the patient, limited time and problems around getting the Information Prescriptions installed on the IT system.

Most healthcare professionals mentioned that the usage of the Information Prescriptions was something they had to get used to, but that the initial investment made their practice easier in the long run.

“Tricky, isn’t it? Because each one of these tools is something I suppose clinicians need to make an effort to invest in [...]. But if you do this for about a year I think the returns will be quite good. You’ll have a more self-aware patient, you’ll have a patient who understands targets; you have a patient who’ll work with you so if you invest upfront your time and your efforts then I think it’s for you and your patients both to reappraise those benefits.” —general practitioner

Way forward
The results of this preliminary evaluation will inform the ongoing development of the Information Prescriptions and Diabetes UK is currently working with Newcastle University to develop a more in-depth evaluation of the Information Prescriptions and their effects on patient outcomes.