

Appendix 2: Detailed results of the methods used to raise preconception awareness

Group sessions

Young women “Just for girls”

- A session for young women aged 18-25, one of our “hard to reach” groups was piloted.
- The group gave young women a chance to share their experiences and talk about issues relevant to them including pregnancy. A Diabetes UK DVD about preconception, aimed at young women and entitled “Rebel Rebel” was shown during the sessions.
- The sessions were led by a diabetes educator who had previously worked in the young Adult Service and Diabetes Obstetrics clinic.
- A total of 60 women were invited, and 19 agreed to attend.
- 4 sessions were run during the year and were 2 hours in length.
- 53% of the women who attended had failed to attend at least 2 appointments in the previous 12 months, and so we successfully engaged women that the traditional service was not reaching.
- The educator described the sessions as
“A pleasure to do”
- Comments from women included:
 - *“I was happy to come along and meet some other people my age who have diabetes.”*
 - *“The meeting was very helpful. More often please!”*
 - *“Hearing that other girls have problems with their diabetes too was helpful”*
 - *It was helpful to “talk to other girls about their diabetes and how they cope”*
 - *“just keep it going”*
 - *“information about exercise was helpful”*
 - *“I liked listening to other peoples’ stories”*
- Although pregnancy was only one of several issues discussed, several girls commented on this aspect of the session: One girl stated that it was
“Reassuring to find out the diabetes doesn’t have to have a negative impact on pregnancy and support is available.”
Another stated
“If I plan to get pregnant I’ll take on the advice given today.”
I third made the constructive suggestion that a

“Couples’ group on family planning” would be beneficial as would “talks from postnatal women”.

- This was a successful method of engaging young women who had defaulted from hospital follow up, it remains to be seen whether these women choose to access preconception care when they are ready to have their families.
- The groups will be continued as part of the young adult service instead of some routine follow up appointments.

Postnatal groups

- Women attending antenatal clinic have frequently voiced the benefits of shared experience and support. They had also described feeling abandoned after months of intensive support in the antenatal period. With this in mind we piloted mother and baby groups. In addition, it was hoped that women who had attended preconception care might persuade women who did not attend for pre-pregnancy care to seek advice before subsequent pregnancies. Women who had diabetes as a result of pregnancy (gestational diabetes) who were subsequently found to have pre-diabetes (impaired glucose tolerance) were included as they have an up to 60% risk of developing diabetes over the subsequent 5 years.
- 41 women were invited, and 14 agreed to attend
- 8 out of 14 had received preconception care
- 3 groups were undertaken and were led by the Nurse Educator and Specialist Midwife.
- Sessions were 2 hours in length
- Women attending the sessions have found it useful. Comments include:
 - ***“It was useful talking to people in the same situation as well as the experts,” and it was “good to see the positives as the literature is often quite negative.”***
 - ***“Good idea to talk about before and after pregnancy” and that she felt that she had “been given a lot more advice and [knew] where to go for further help and advice”. She stated that she “would like to do these meetings more”.***
 - ***“Felt valued and thought about, a while after having my baby but still remembered which is nice.***
 - ***“Hearing about other peoples’ experience” was helpful***
 - ***“a very useful morning, relaxing and friendly, nice to talk to other diabetics who understand what you have been through”***
- While it was pleasing to receive the positive feedback from the women, at the low uptake of these sessions particularly from women who had not accessed preconception care was disappointing. The observations of the Specialist Midwife and Diabetes educator who ran the sessions made it clear that the needs of the women with Type 1 diabetes were different from those with Type 2 diabetes. Subsequent groups were run separately for these women.

- Despite this there were insufficient numbers within a particular group to justify continuing these sessions long term. The women were also not at a stage where they wished to discuss preconception care. As the sessions were not attended by 67% of postnatal women, we opted to discontinue the group sessions, and contacted all women 2 weeks after they delivered to ask whether any support would be helpful, and invited women who did not access preconception care to attend for a postnatal visit. The feasibility of antenatal group sessions is being explored.

South Asian Women

- A curriculum was developed and potential women identified from a GP practice with a 7% prevalence of diabetes with the majority of their patients from South Asian backgrounds from low socio-economic groups.
- Unfortunately women did not wish to participate
- In addition pilot was undertaken to assess whether South Asian women from low socio-economic backgrounds with a history of gestational would attend for lifestyle advice at their Community Pharmacist, as they were at high risk of developing diabetes in the future.
- 8/10 women invited attended and not only engaged with the pharmacists regarding lifestyle advice, but 4 women also came back with relatives.
- In February 2012, it was agreed with the Community Pharmacist that he would discuss preconception not just as part of their medications review service, but as part of their 2012 New Medications service which would specifically target women with gestational diabetes who were subsequently found to have diabetes, and therefore need to be aware of the need for preconception care for future pregnancies. This will be further evaluated in 6 months

Mailing of SAFER leaflets.

- 714 SAFER leaflets (Appendix 1) were mailed to women with diabetes aged 18-45 in Derby and Southern Derbyshire
- Names were obtained from our own and GP practice databases.
- There were no complaints as a result of sending these leaflets.
- The mailing has resulted in 3 self-referrals to PROCEED to date.
- A random sample of 25 women were contacted by telephone, and a questionnaire (included at the end of this section) administered by the project coordinator to assess the value of the exercise.
- 19 (76%) recalled receiving the leaflet
- Of the 6 who did not, 2 leaflets sent to the incorrect address and another's GP practice had not sent the leaflet in error.
- Figures 10 show the women's pregnancy plans and Figure 11 their knowledge as to whether there were aware of the need for PCC and how to access this in women who did and did not recall receiving the leaflet.

Figure 10: Pregnancy plans in women sent the SAFER leaflet, expressed as percentage of total responses.

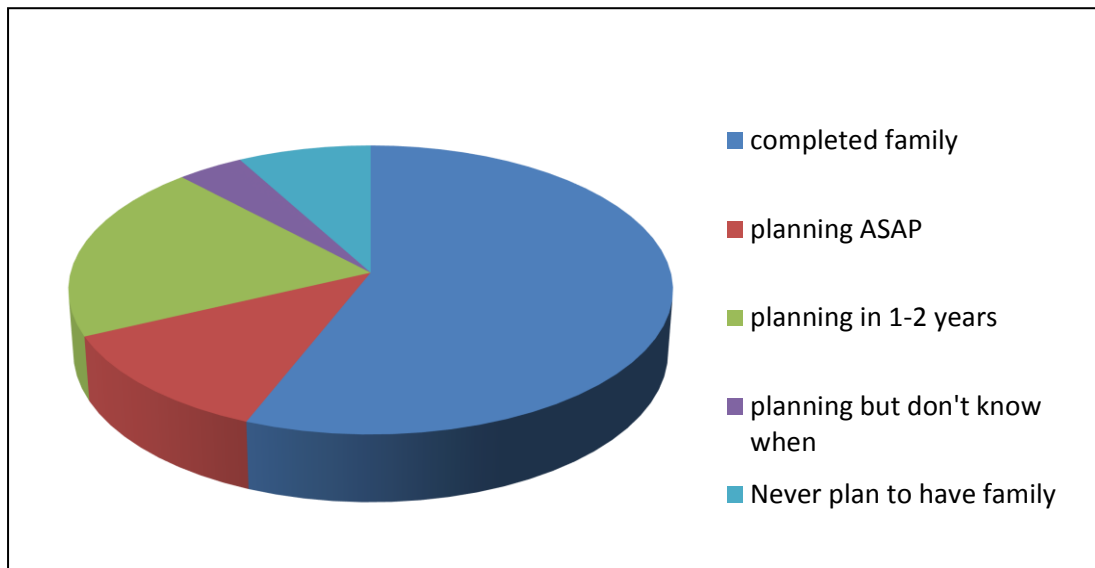
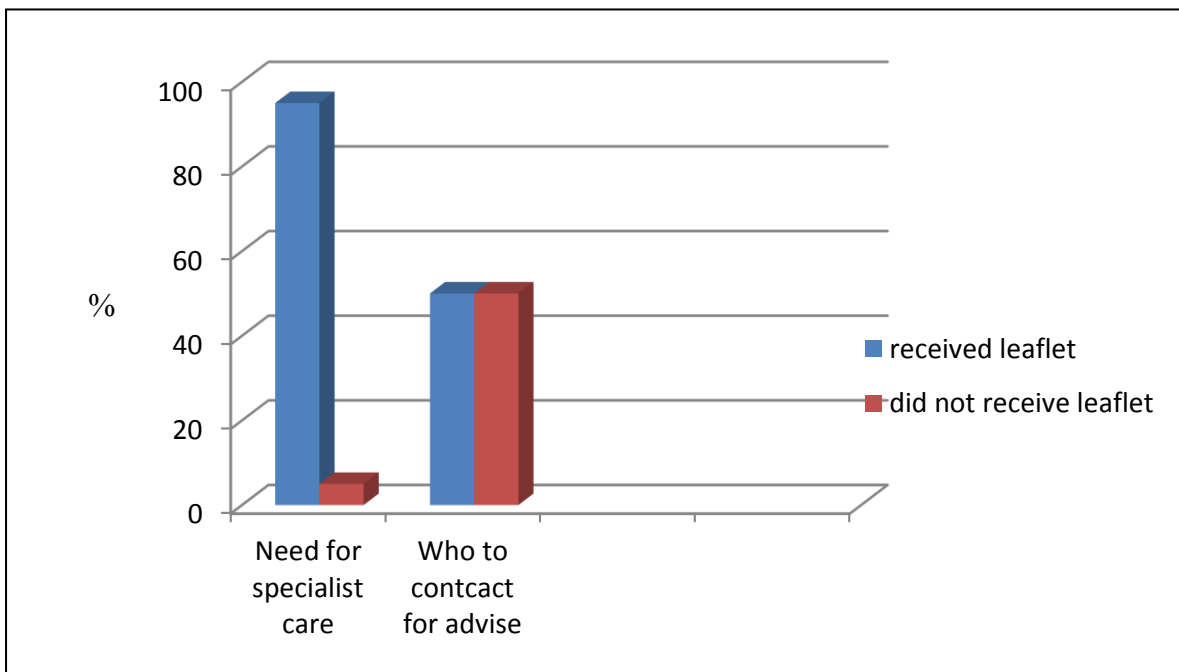


Figure 11: Percentage of women who knew that specialist preconception care is needed and how to contact the specialist team in those and in those who did not recall receiving the leaflet.



- While 56% of women in this survey had completed their families, just over one third were considering pregnancy in the next few years.

- 95% of women who recalled receiving the leaflet were aware of the need for PCC, compared with 5% who did not recall receiving the leaflet.
- Only half of the women in either group were aware how to contact the specialist team. Local contact information is printed on the back of the SAFER leaflet.
- 3 women were offered PROCEED clinic appointments as a result of the survey.
- This small survey supported the value of the mailing exercise.
- Contact information needs to be more prominently displayed.

The exercise will be repeated in 3 years.

Working with Community Pharmacists

- Following 2 presentations for pharmacists at meetings organised by the Local Pharmaceutical Committee, it was clear that there was much interest amongst the Pharmacists as to their role in raising preconception awareness.
- One group of pharmacists, the BJ Wilson group comprising 6 Pharmacies opted to audit the role of Community Pharmacists in promoting preconception care not just for diabetes, but all chronic conditions.
- Their baseline audit in September 2011 demonstrated that only one pharmacy asked women about pregnancy plans. After 6 months all pharmacies were asking women of childbearing age about pregnancy plans as part of their Medications Review Service.
- 25 consultations were undertaken in women with diabetes of childbearing age. Eight women were considering pregnancy over the following 1-2 years. The SAFER leaflet was given to these women and they were given the PROCEED contact information so that they could self-refer to the service.

Other methods of raising preconception awareness

- Presentations at update sessions in Primary and secondary care
- Discussions with other professionals involved in the care of women with diabetes
- Putting up posters and leaving SAFER leaflets in waiting areas and consulting rooms in diabetes clinics and other clinics that woman with diabetes attend such as infertility clinic and retinal screening.
- Use of Internet media through Twitter and Netmums

Questionnaire for SAFER leaflet

Details

Name.....

Dob.....

Address.....

Diabetes Type : 1 /2 / other

Year Diagnosed / Duration.....

Current treatment (including contraception)

1. Have you had any children since your diagnosis with diabetes : YES go to question 2

NO go to question 3

2. Did you receive care before you became pregnant NO / YES

If you answered yes, where did you receive this care?.....

3. Do you plan to start a family?: I have completed my family

I am considering getting pregnant as soon as possible

I am considering pregnancy in 1-2 years time

I would like a family, but don't know when

I never want children.

4. Are you aware that it is advisable to have specialist care to prepare you try for a baby?

NO –go to question 6

Yes- go to question 5

5. Would you know how to contact the specialist team if you were planning pregnancy?

YES / NO

6. Do you recall receiving a leaflet about diabetes and pregnancy? YES / NO

7. Please feel free to add any comments

Thank you on behalf of the PROCEED (Preconception for diabetes in Derby) Team