Using Coproduction & WhatsApp™ to improve engagement of adolescents with Type 1 Diabetes Mellitus

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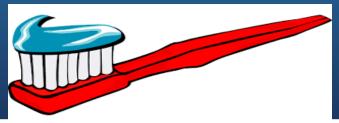












Broadcast logistics

- 'Broadcast' not 'group'
- WhatsApp™ is not secure
- Calidicott/local guidelines
- Discussion with Information risk manager at NWLH
- Consent forms
- Business plan
- All patients were over 11 years old
- Number of patients = 20, staff = 4
- No one dropped out



Benefits

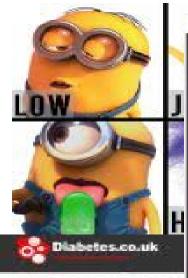
- Quickly send out information to a large group without patients feeling they have been singled out
- Patients can be actively or passively involved
- Facilitating sharing information about health, services and experiences
- Encouragement/Emotional support
- Bridge gap between appointments
- Virtual community/forge relationships peers

Risks

- Professional boundaries blurred
- Intrusive
- Digital footprint-permanency of internet









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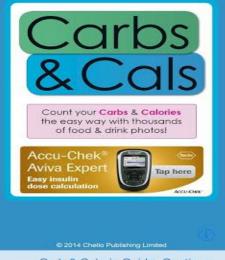
Can people wi Finding test strips in, on, and under diabetes get special access to theme parks?







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Carb & Calorie Guide Continue

What used for...

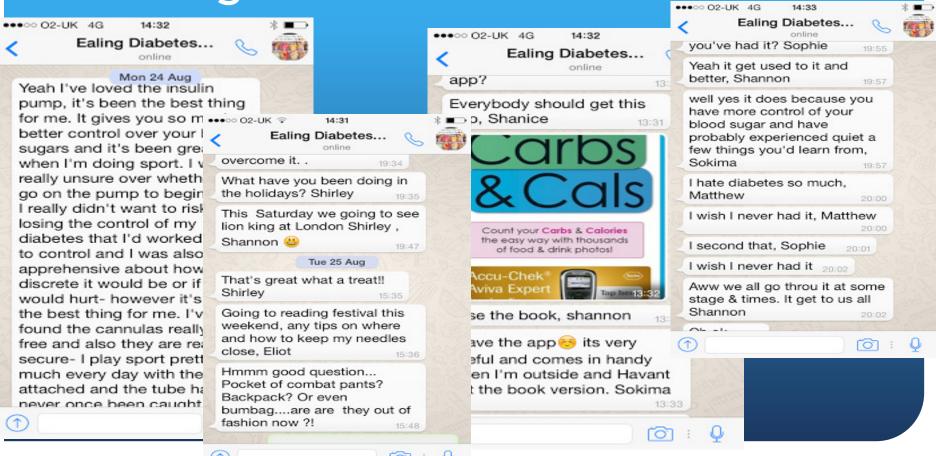
• Giving each other advice...





Support.....





Qualitative data

'This is what my son needs, he knows no one with diabetes and often feels he is the only one who has to inject then acts out.'

'I find it good to get support from others'

'I find it easier to ask questions on the WhatsApp group'

Positive things: 'Talking to others about diabetes'

'The tips from Dr Kumar and the tips for the cookbook from Sakaria'

Patient feedback

• 100% respondents thought WhatsApp™ improved access to information & that they had learnt something new

• 67% felt more motivated to managed there diabetes

HbA1c Change (%)



Mean Pre = 9.7% Mean Post = 9.0%

Median Pre = 9.8% Median Post = 7.9%

Summary

• Digital strategies can be easily adopted into diabetes care

• Improve patient experience, information & engagement

• Poorly controlled patients can engage and improve control