

'Living Well' A self-management programme for adults with chronic conditions - Recovery, Resilience, Reform



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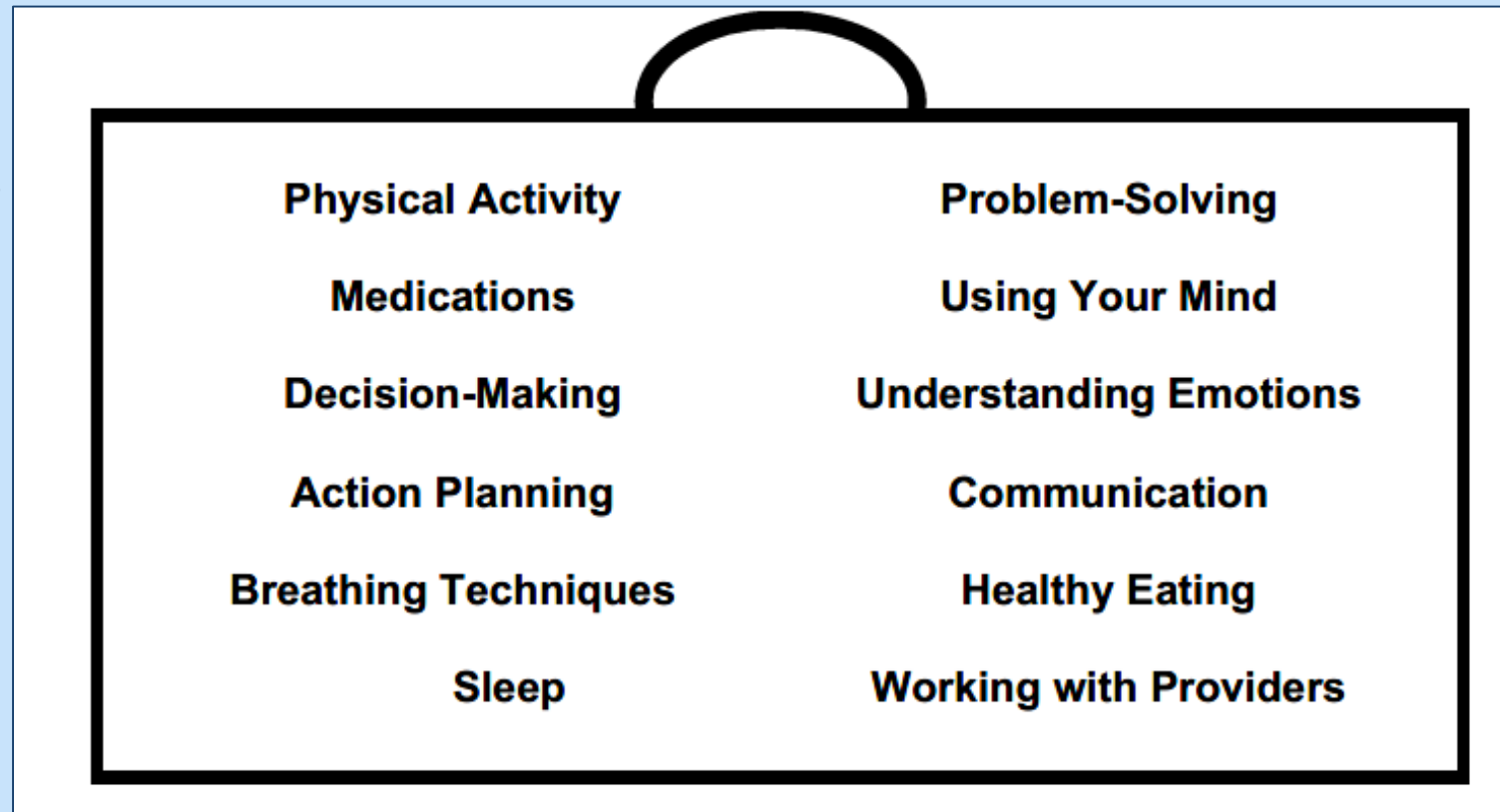


This project has received funding from the Government of Ireland's Sláintecare Integration Fund 2019

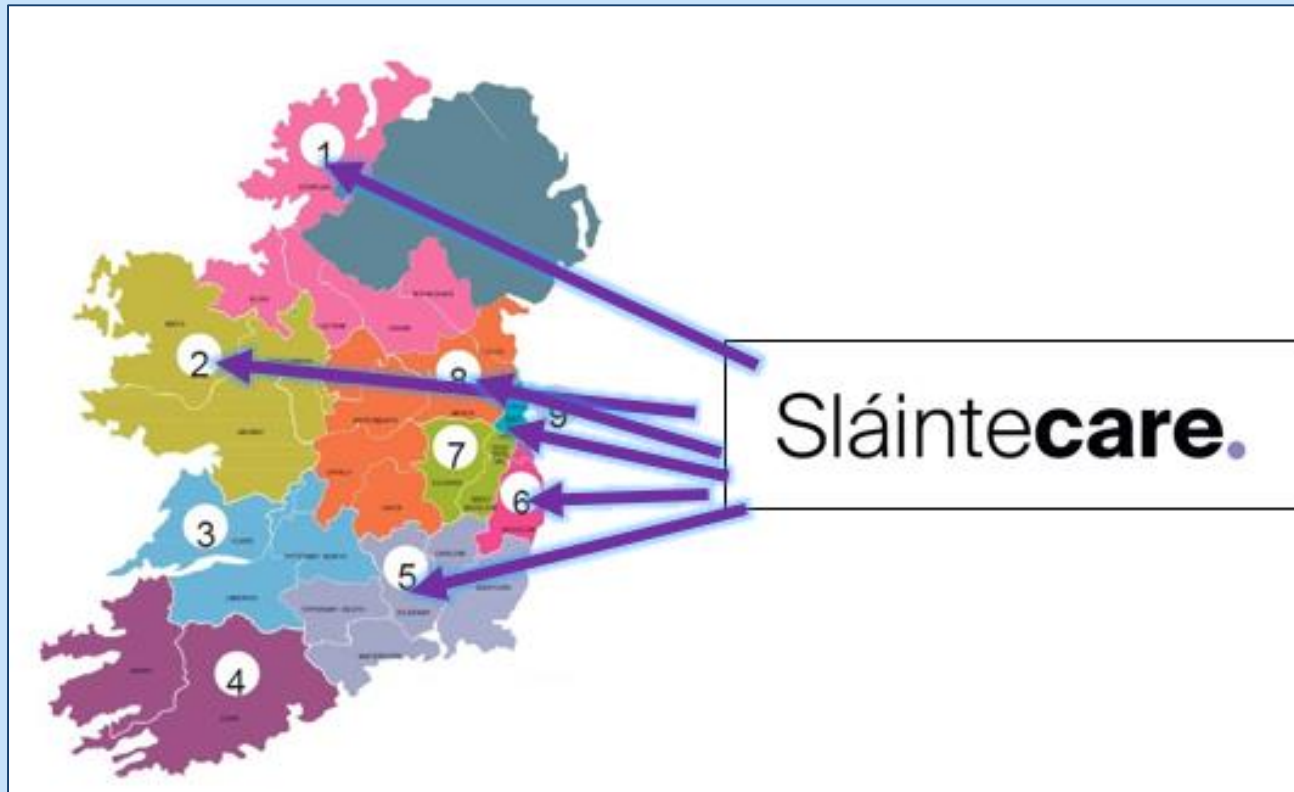
Background

Chronic Disease Self Management Programme (CDSMP)

- Structured
- Evidence-based
- Peer led
- Six workshops x 2.5 hours



Sláintecare – leading the way in Recovery, Resilience, Reform



www.hse.ie/livingwell

Slaintecare-funded Living Well activity: Jan 2020 – Dec 2021

No of Programmes delivered	199
No of Participants	2,154

Strategic Context – Shifting Left



Living Well with a Chronic Condition: Framework for Self-management Support

National Framework and Implementation Plan for Self-management Support for Chronic Conditions: COPD, Asthma, Diabetes and Cardiovascular disease



Sláintecare.



- Innovative structured evidence based vehicle for delivering SMS
- Generic skills
- Multiple morbidity addressed
- Synergistic with CR, PR

Facilitates re-orientation:

- Peer-led
- Community delivery / online
- Wider-system connection
- Empowers action to impact health
- Enables 'Step-down'

I learned so much about myself and living with my illness. Previously I would let my illness and symptoms consume me and it would greatly affect my mental state. I never realised there was a different way of thinking and managing my life. It never crossed my mind before that I could have an impact on my own health'.



Living Well - Building Resilience through working in Collaboration

Project Leads: Self-management Support Coordinators

Collaboration =

- National Governance Structure (I-NAG SMS)
- National Working Group for Living Well – all Community Health areas
- Streamlining:
 - Operational processes
 - Communications
 - Irish Context
- Pivot to online as a response to COVID19
- Evaluation:
 - Addressing gaps:
 - Longitudinal data
 - Online version
 - Implementation processes
- Final research report presented to Slaintecare Feb 2022

Evaluation Methodology

1. Participant level data:

- T1: Pre Living Well
- T2 immediately post Living Well
- T3: 6 months post completion
- **T1:** 913; **T2:** 576; **T3:** 336
- paired samples t-tests / Wilcoxon signed rank test. Statistical significance = $p < .05$

2. Implementation processes:

Stakeholder feedback on delivery, governance and quality assurance:

- Surveys
- Focus groups
- Documentary analysis
- RE-AIM Planning and Evaluation Framework (Glasgow et al, 1999)



Outcomes

- **94% of participants were satisfied or highly satisfied with the programme.**
- **Significant ↑**
 - QOL & Health Related HR-QOL
 - Self-efficacy for managing health
 - Physical activity
 - Digital confidence including to engage in other e-health interventions
 - perception of support available to manage their health
- **Significant ↓**
 - depression
 - illness interference in overall social/role activities.
 - Healthcare Utilisation (35% reduction in GP attendance at 6 months post completion)



"I feel more in control of my illness now, having learnt a number of Self-Management skills."

'thank you for giving me Confidence and for helping/teaching me to manage my symptoms and cope better'

'helped me to focus on managing my pain medication properly'

"I have learned that there are a lot of things which I can do to help myself live with Type 2 Diabetes and secondary cancer."

"Living Well has given me the opportunity and support to learn and manage my condition very well, stay active and live well"

"The information given about diet, food labels and portion control in the programme was just what I needed...since starting LW I have lost 2.5 stone since, which has a good knock on affect on my health"

Success factors

Slaintecare funding enabled

- At scale test of concept

Robust independent evaluation:

Addressed gaps and enhanced evidence base

Harnessing digital tech/pivot to online

- Continued to reach those most vulnerable during pandemic
- Enabled ongoing collaboration between projects
- Resulted in a more digitally informed and enabled project team and more digitally literate service users

Learnings & recommendations

- **Research: Clear guidance & adequate resourcing for future funding initiatives**
- **Robust governance and programme structures**
- **Retain blended model** - High satisfaction ratings for online
- **Peer support:** *“The Leaders didn't just talk the talk, they walked the walk as they too live with pain and carry out positive actions to help.”*

<https://youtu.be/YxQeEFG27ic>

‘Embed the Living Well Programme in the national MOC for CD and at operational level so that it becomes an integral element of clinical care for people living with CCs in Ireland.’

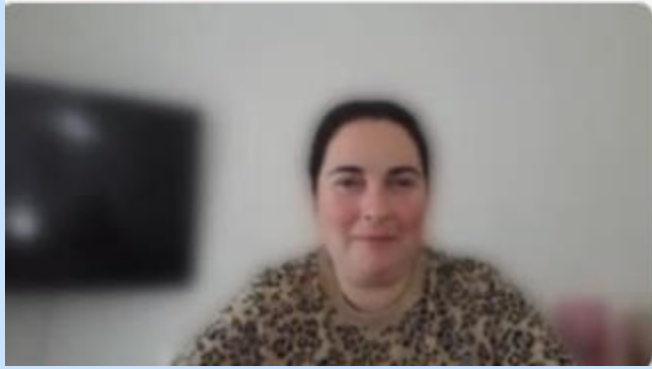
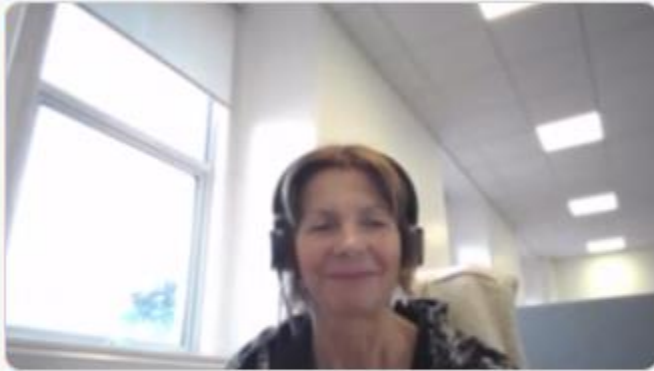
Key Recommendations for Reform Agenda

‘Provide a sustainable model of LW programme resourcing’

Moving Forward...

- ❑ 6 CH Areas with Living Well embedded
- ❑ 2 CH Areas with LW introduced
- ❑ Working w local CDM Leads to embed in pathways
- ❑ Exploring options collaboratively re national upscale







Thank You

