

2013 Knowledge Transfer Scheme

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Title of research project: Maximising the impact of an innovative preconception counselling resource for women with diabetes

Abstract: Rates of adverse pregnancy outcome (stillbirth, perinatal mortality and congenital anomaly) are higher in women with diabetes compared with the general maternity population. Pre-pregnancy care is cost-effective and reduces adverse outcomes, yet not all women with diabetes are informed about the need or rationale for pre-pregnancy care, ultimately leading to poor uptake. The underpinning research designed, developed, and evaluated a preconception counselling resource for women with diabetes (a DVD) to improve pregnancy outcome by increasing the proportion of women who plan their pregnancies and seek pre-pregnancy care. Evaluation findings suggest that 89% of women who viewed the DVD subsequently sought pre-pregnancy care or made positive lifestyle changes before conceiving.

'The problem': Despite a targeted DVD distribution process throughout Northern Ireland, reaching all women with diabetes of child bearing age has proved to be problematic; evaluation findings suggest that 28% of women with type 1 and 62% of women with type 2 diabetes did not receive this preconception counselling resource from a healthcare professional (HCP) prior to their pregnancy.

Knowledge transfer process: To further develop and 'champion' this preconception counselling resource to ensure that all women with diabetes of child bearing age are aware about the importance of planning for pregnancy and are encouraged to seek pre-pregnancy care and prevent unplanned pregnancies. Raising awareness about the importance and availability of this resource among women with diabetes and HCP's involved in their care will be central to our solution. The DVD was recently converted to website delivery; the project will optimise resource delivery to maximise impact for both patient and HCP by modifying the web based interface in consultation with users. To liaise with leading continuing professional development (CPD) providers regarding inclusion of the resource within relevant CPD programmes. To promote the resource at HCP conferences; engage with key groups to ensure resource details are advertised in HCP member mail-outs and newsletters and instigate a poster and flyer campaign in Diabetes clinics, General Practice and Community Pharmacy. To engage with primary practice and community pharmacy to explore the feasibility of trigger for intervention approaches for preconception counselling to ensure resource sustainability.

The target user community: This resource can empower women with diabetes to plan for pregnancy. It can be used as a tool by all HCP's involved in the care of women with diabetes to deliver preconception counselling. By incorporating the resource into undergraduate and CPD programmes of HCPs, such as GPs, pharmacists, nurses and midwives the resource will raise awareness among HCPs of the importance of preconception counselling for this group of women.

Likely impact: Successful knowledge transfer of this resource should result in an increase in the proportion of women with diabetes that are aware of the need to plan for pregnancy and an increase in referrals to pre-pregnancy care clinics which should result in improved maternal and neonatal outcomes for women with diabetes.