

Partnering for success: developing a training programme for joint teams of lay and health care professional educators delivering DESMOND structured group education in diabetes

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Aims/Objectives: To enable lay educators to successfully deliver structured group education in diabetes by: a) attaining an appropriate level of diabetes knowledge, b) fostering a positive team dynamic and c) developing effective group facilitation skills.

Methods: A task group drawn from the DESMOND Lay Educator Study investigators, developed a training framework for lay educators. The group drew on findings from an action research project conducted by Leicester University which identified key obstacles for potential lay educators including: a) lack of diabetes knowledge; b) impact of learning for self-knowledge at the same time as learning for the role of educator; c) lack of sufficient experience in group work. The task group planned an iterative cycle of training and feedback beginning with an initial package of preparation, training and support carried out through centralised training days, specific DESMOND educator training and on-site practice delivering group education in local teams. A total of 12 lay educators (LEs) and 12 health care professional educators (HCPEs) working in 6 teams of 4 (2 LEs and 2 HCPs) took part in a 1-day preparation course. The purpose of this day was to promote team work, introduce people to the study and prepare LEs for formal DESMOND educator training. Lay educators then attended the standard 2-day DESMOND educator training together with other prospective educators from around the UK.

In each of the 6 study sites, LEs delivered DESMOND in teams of 3 (1 HCPE & 2 LEs). The teams then came together for a formal feedback day to share their experiences and to highlight outstanding needs as individuals and as teams.

Results: As intended, the initial package had partly met the stated aims of the training. However, the feedback process was successful in identifying generic, team and individual training and mentoring needs. For the LEs, the generic needs were further opportunities for practice and developing diabetes knowledge. For HCP educators generic needs were around developing mentoring and feedback skills. Some teams recognised a need for team mentoring via an experienced trainer and individuals expressed a variety of needs, generally focussed around delivery of the education programme.

Conclusion: In creating a successful training framework for any group it is crucial to use an iterative cycle of development for incorporating the feedback and experience of all participants. Training must also recognise that individuals develop at different rates and to be successful, must address specific individual needs in addition to those that are generic.

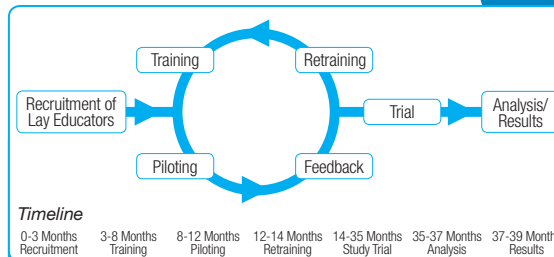


Fig. 1 Lay Educator Study: Schematic

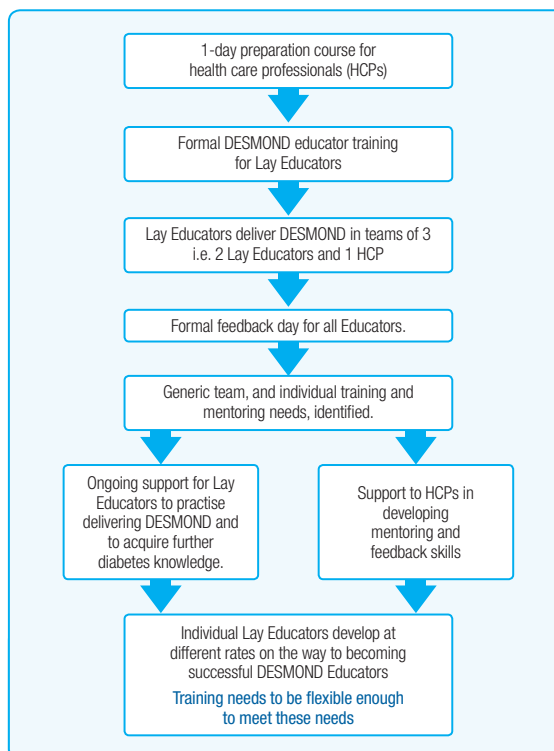


Fig. 2 Iterative Cycle of Training