

Multidisciplinary Group Education for Patients Recently Diagnosed with Inflammatory Bowel Disease

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Abstract

Incidence of Crohn's disease and ulcerative colitis, collectively known as inflammatory bowel disease (IBD), in NZ is increasing. It is not feasible to provide all patients with one-to-one education at diagnosis. *Our solution* was to provide a multidisciplinary (gastroenterologist, IBD nurse, IBD dietitian) group education opportunity to all patients recently diagnosed with IBD in Canterbury and West Coast regions of NZ.

The session was supported by the Canterbury Crohn's and Colitis Support Group. Information about the diseases, pharmaceutical and dietary treatments and self-management strategies were presented.

Two evening group education sessions were attended by 23 patients (47 were invited); one *via zoom* during a COVID lock down and another *face to face*. There was *high patient satisfaction* with the sessions (8.9/10.0) and patient felt *more confident to manage their IBD* (7.7/10.0).

The sessions addressed *health inequities* for patients unable to attend day-time appointments/sessions due to work, carer or travel reasons or who would not access public health services due to referral criteria.

Outcomes

The project has shown *there is patient interest* (23 attended of the 47 patients invited (49%) in receiving further information about their disease and its management.

There is a *demand for both virtual and face-to-face formats*.

The second session included a pre-recorded presentation due to a presenter isolating due to the COVID. The presentation still meet patient expectations (9.4/10.0).

Patient feedback questionnaires showed that patients:

1. felt more confident to self manage their disease (7.7/10.0)
2. were highly satisfied with the multidisciplinary session (8.9/10.0)
3. would recommend the session to others with IBD (9.6/10.0)

Addressing Health Inequities

The project enabled a greater range of patients to *access specialist input*. Currently publicly funded specialist input is only available to those who meet strict referral criteria. The criteria is the same for everyone regardless of age, sex, ethnicity, financial situation.

The *evening group education session enabled* patients to access multidisciplinary disease information from IBD specialists when:

1. they work days jobs and cannot take time off work
2. have day-time carer responsibilities
3. unable to travel for any reason
4. do not meet current tertiary referral criteria

Implementation / Transition to Practice

The project outcomes could be *implemented nationally*.

National implementation would *reduce regional inequalities* in specialist access.

National implementation *could vary locally*. For example, a recorded/web-based programme or standardised slides delivered by local staff.

National implementation would need the support of national organisations including Crohn's and Colitis NZ, NZ Society of Gastroenterology and Dietitians NZ