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Implementation of Type 2 diabetes guidelines in people with severe mental illness

Dr Hayley McBain[1], Frederique Lamontagne-Godwin[2], Dr Mark Haddad[1], Professor Alan Simpson[1], Jacqui Chapman[3], Dr Julia Jones[4], Dr Chris Flood[1] & Dr Kathleen Mulligan[1 5]

[1] School of Health Sciences, City, University of London, London, UK

[2] College of Nursing, Midwifery and Healthcare, University of West London, London, UK

[3] Newham Centre for Mental Health, East London NHS Foundation Trust, London, UK

[4] Diabetes Unit, East London NHS Foundation Trust, London, UK

[5] Centre for Research in Primary & Community Care (CRIPACC), University of Hertfordshire, Hatfield, UK

[6] Community Health Newham, East London NHS Foundation Trust, London, UK

Abstract

Aims

People with severe mental illness (SMI) are twice as likely to develop diabetes, experience a greater risk of complications, die significantly younger and are less likely to receive recommended diabetes care than those without SMI. To establish healthcare professionals views about the barriers and facilitators to delivering recommended diabetes care to people with SMI.

Methods

A qualitative interview study, followed by a survey of HCPs involved in the care of people with Type 2 diabetes and SMI, using the Theoretical Domains Framework (TDF).

Results

Sixteen healthcare professionals, from a range of professions, were interviewed and 386 surveyed. Thirty-three barriers and facilitators were deemed relevant and informed the survey. Those working within primarily physical health settings were less aware of Type 2 diabetes guidelines *(p*<0.001) and how to manage diabetes in people with SMI (*p*=0.001), felt they had insufficient time (*p*=0.009), needed more training in negotiation and communication (*p*<0.001) and were scared to work with people with SMI (*p*=0.001). Whilst mental health professionals required more training in diabetes (*p*=0.001), felt they more likely to be disciplined if they did not manage Type 2 diabetes in someone with SMI (*p*=0.002) and felt responsible for fewer diabetes related care activities (*p*<0.001).

Conclusions

The findings highlight that healthcare professionals experience a range of barriers and enablers when attempting to manage Type 2 diabetes in people with SMI and these differ depending on whether they are primarily physical or mental health clinicians suggesting interventions need to be targeted at an organisational and individual level.

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