

Transitioning a Support and Resource Group for Youth with T1D to a Virtual Format During the Pandemic

Regina Williams, RN, BSN, CDCES*; Bernadine Holland MSN, MBA, CDCES;
Shelley McDaniel, MS, CCLS; Katie O'Sullivan, MD; Tina Drossos, PhD; Taylor Mossing, LSW

PROBLEM

- Multi-disciplinary group formed in 2018 to provide education, resources and support for high-risk youth with type 1 Diabetes (T1D) and their parents¹
- Three in-person meetings were held in 2019/2020 but suspended after 3rd group due to pandemic restrictions
- Data demonstrated sessions were positively received, and attendees still wanted to meet. How will the group pivot, keep momentum and provide sessions safely amid Covid-19?

PROGRAM GOALS

- To continue regularly scheduled groups through video conferencing and build on established successes
- To offer education and resources virtually while maintaining attendance and engagement of parents and youth
- To expand outreach and attendance through the modality of video conferencing and transition to future in-person sessions

STRATEGIES

- Increase meeting frequency from quarterly to monthly to keep interest on a continuum.
- Breakout room and session themes alternated to maintain interest:
 - Education (i.e., Technology updates) and Guest Speakers; virtual format, allowed option for national or international speakers
- Duplicated in-person session strategies, separate parent and youth group education and discussions using clustered approach:
 - Parent and youth breakout rooms
- Designed a point/prize incentive program to keep it upbeat, competitive and fun for the youth
- Assess availability of staff during the planning process: Endocrinologist, Psychologist, Certified Child Life Specialist, Social Work (if available) and 2 Certified Diabetes Care and Education Specialists (CDCES). Staffing was easier in virtual format
- Communication: use RSVP survey, emails, phone/reminder calls
- Incorporate survey RSVP data and topic requests of families in session format choices at all steps of planning

RESULTS TO DATE

- First video conferencing group held 11/2020
- Staff and families able to use the video conferencing model with surprising ease
- Incentives were given every fourth meeting and points awarded for participation and not attendance only as originally planned. This increased involvement of our youth during the break-out room session. In addition, Diabetes Camp Scholarships were given to those attending consecutive sessions (8 scholarships provided in 2023)²
- Prizes and scholarships obtained through the funding of Kovler Diabetes Center
- Email blasts, reminder emails, surveys, calls and RSVPs proved successful in maintaining and increasing attendance (75% of reminder called families attended sessions)
- Following family input, as pandemic restrictions lifted, every other session was held in-person starting in 06/22. This change resulted in a surge of new families attending
- Figure 1 Illustrates meeting attendance over time from 7/2019 to 6/2023 with a marked increase for in- person sessions post pandemic**

Figure 1 Pre and Post Covid-19 Meeting Attendance

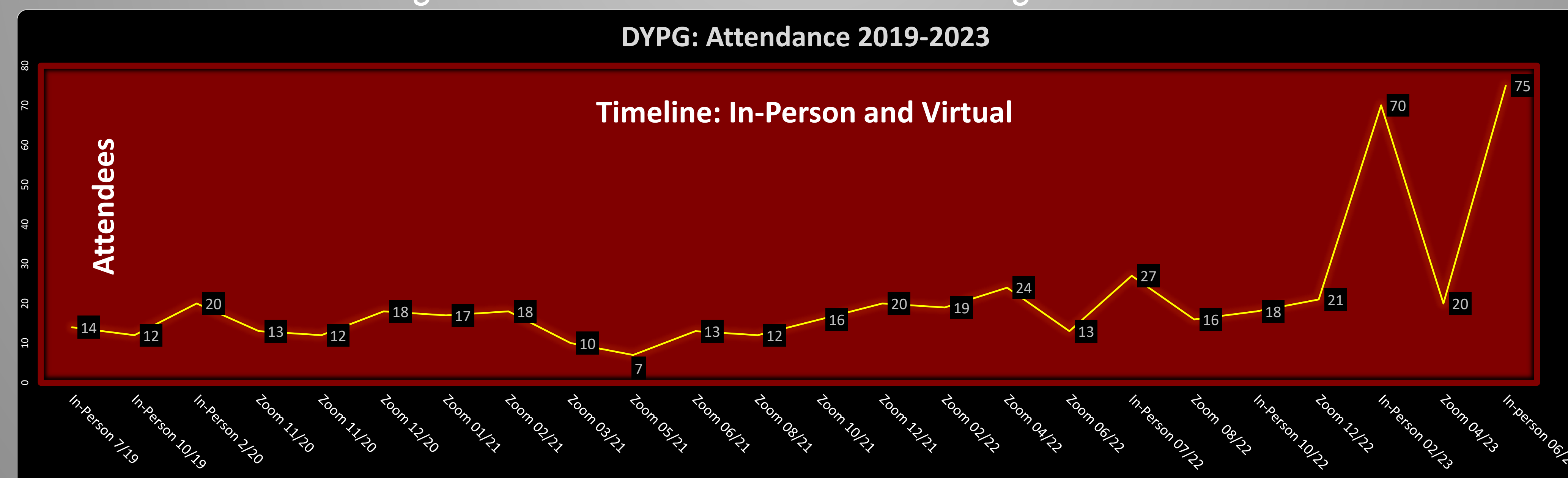


Figure 2: Pre Covid-19 Meeting Youth group and Parent Group*



Figure 3: Post Covid-19 in-person group*



NEXT STEPS

- Continue with current format of program; alternating video conference and in-person groups
- Establish a Parent Board and a Buddy Program to engage participants, review content needs and connect families.
- Explore methods to increase attendance of high-risk teens
- Collaborate with neighboring children's hospitals to share strategies
- Continue outreach with social service organizations
- Develop a business plan with budget for further growth

CONCLUSION

- This program thrived during a world-wide pandemic and continues to expand as restrictions have been withdrawn
 - Use of a multi-disciplinary team, innovative forward thinking, and consideration of the desires/wishes of families have been tools used to sustain and grow the group
 - The latest event, June 10, 2023, our First Annual Picnic with 75 attendees was the largest in-person session thus far!
- One mom of a pre-teen with T1D wrote: *“Thank you so much for having the foresight to host the groups. The information received was invaluable and helped us make the best decisions for Jalen*. We are very grateful to you guys”*

* Consents obtained for use of photos and names

REFERENCES

- Hilliard ME, De Wit M, Wasserman RM, Butler AM, Evans M, Weissberg-Benchell J, Anderson BJ. Screening and support for emotional burdens of youth with type 1 diabetes: Strategies for diabetes care providers. *Pediatric Diabetes*. 2018 May;19 (3):534-543. doi:10.1111/pedi.12575. Epub 2017 Sep 22. PMID:28940936; PMCID: PMC5862727.
- Ng SM, Corbett T, Doble E, Brooks A, Kar P. Managing the psychosocial impact of type 1 diabetes in young people *BMJ* 2022; 377 :e070530 doi:10.1136/bmj-2022-070530.

ACKNOWLEDGEMENTS

Peggy Hasenauer, MSN, RN, Emily Mixter: Kovler Diabetes Center,
Elizabeth Ely, PhD, RN
Nicole Pierce-Bohr, PhD, RN
Katelyn DeAlmeida, BSN, RN
Susan Solmos, PhD ©, MSN, RN, CWLN,
Ben Laughton, MBA, MSN, RN
Luz Chavez, MS, RD, CSO, LDN
*Travel Grant recipient from the University of Chicago Medicine's Center for Healthcare Delivery Science and Innovation.