



# Case Study

## Supporting people with rheumatology conditions with queries about COVID 19 vaccination

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“This webinar has been really positive as I have felt rather alone for the last year”

“Having only been diagnosed with RA in September, I found this webinar excellent. Thank you”

### Issues raised frequently by participants

- Vaccine interaction with medication
- Injection timing relative to vaccination
- How rheumatological or auto-immune conditions impact on vaccine efficacy
- Concerns about current flares being caused by first dose of vaccine

## The Challenge

As part of their preparation for running video group clinics (VGCs), the Rheumatology department in Swansea Bay University Health Board decided to run an interactive webinar that mirrored the VGC process to support their patients with questions about the COVID 19 vaccine.

## Webinar Design

The team advertised the 60 minute webinar on social media. 170 people attended. To minimise administration, the joining link was shared widely, with no need to register. A technical facilitator set up the session; confirmed group agreements (including the need to keep questions general and respect confidentiality) and made sure participants knew how to post in the CHAT; mute and unmute. The webinar content included a lady with rheumatoid arthritis, sharing her experience of having the vaccine to reassure others. Patients posted questions in the CHAT for the consultant rheumatologist. A specialist nurse themed the questions and read out the group's questions. Those patients who could not see the CHAT asked questions verbally. This gave the nurse time to scan for new questions and theme them. The team created an FAQ of common concerns and shared it after the webinar. To assess impact, participants gave a baseline and end of session confidence score (Likert scale of 10).

## Positive Impacts

- The Consultant connected with, reassured and answered 170 people's questions in 30 minutes. The team developed a FAQ sheet for the health board's intranet site for those who had not attended the live session
- Prior to the webinar, the service's advice line was inundated with calls about COVID and vaccination. Calls drastically reduced after the webinar.
- The team learnt a lot and gained confidence about delivering both webinars and VGCs
- Participants' average confidence score rose by 19% from a high baseline (8/10) after 1 hour
- Participants appreciated the opportunity to connect and discuss their concerns. They found the webinar helpful and informative

## Lessons Learnt

- A person with lived experience setting the scene and sharing her story worked well
- Many patients asked the same questions. Having run the webinar, the team knows the key points of concern. This has helped the team design a comprehensive FAQ and any future COVID vaccination webinar would focus on these key concerns pro-actively
- A team of four delivering the webinar (including a patient champion) worked well
- A dry run supports team preparation and builds confidence
- Muting participants minimises background noise and is essential to a good webinar experience
- Despite requests to keep questions general, people shared personal medical history. This is inevitable; their choice and their right. Clinicians generalised responses. Gaining consent and agreement to maintain confidentiality outside the webinar at the start of the session is vital in webinars (just as it is in video group clinics or other online group sessions)

