

Workshop Guide

1. Introductions between participants
2. Overview of study
3. Results of quantitative analyses and publications so far
4. **Ask participants for initial thoughts prior to discussions.**
5. Guided discussions under the following headings:
What is the aim?
To consider ways to better personalise care for patients with RA.
How?
Through the identification of appropriate care packages supported by members of the MDT.
Based on what?
Individual risk at baseline, for adverse functional and disease activity outcomes in the longer-term OR any other parameters we consider relevant?
6. Present with following list of MDT members and ask participants to discuss their role in care:
 - Clinicians – rheumatologist, nurse specialist
 - Physiotherapist
 - Occupational therapist
 - Psychologist (health/clinical/occupational)
 - Social worker/benefits
 - Dietician
 - Podiatrist
 - Pharmacist
 - Other specialties: e.g., pain team, orthopaedics, other medical specialties.
 - Primary care physicians
 - Others?
7. Consider example patient. What type of support would they need that is the **same** as other individuals with RA? What type of additional support would they need?
 - Female, age 65
 - High HAQ on presentation
 - Low educational attainment
 - Minority ethnicity
 - Language barriers
 - Socially deprived area
8. Questions at end to summarise thoughts from the group:
 1. Should every RA patient have input from all these members of the MDT?
 - 2a. Any other members of the MDT?
 - 2b. At which stage of their disease?
 3. How formalised should their input be?