

University of Vermont

UVM ScholarWorks

Family Medicine Clerkship Student Projects

Family Medicine Community

2023

Pre-visit questionnaire for diabetic patient visits

W. Evan Shaw

Larner College of Medicine

Follow this and additional works at: <https://scholarworks.uvm.edu/fmclerk>



Part of the [Medical Education Commons](#), and the [Primary Care Commons](#)

Recommended Citation

Shaw, W. Evan, "Pre-visit questionnaire for diabetic patient visits" (2023). *Family Medicine Clerkship Student Projects*. 855.

<https://scholarworks.uvm.edu/fmclerk/855>

This Book is brought to you for free and open access by the Family Medicine Community at UVM ScholarWorks. It has been accepted for inclusion in Family Medicine Clerkship Student Projects by an authorized administrator of UVM ScholarWorks. For more information, please contact schwks@uvm.edu.

Diabetes Distress Tool

Colchester Family Medicine
Family Medicine Clerkship Dec/Jan '22/23

W. Evan Shaw, MS3 – Mentor Dr. Ben Clements



The University of Vermont
LARNER COLLEGE OF MEDICINE

Problem Identification & Description of Need -

Medical practice transformation

- 37.3 million people in the United States have diabetes (11.3%).
 - 23.8% met the recommended goal of at least 150 minutes/week of leisure-time physical activity.
 - 77.3% reported managing or losing weight to lower their risk for developing certain diseases.
 - 56.8% of adults aged 40-75 were on statin therapy.
 - 35.8% met: A1C value <8.0%, blood pressure <140/90mmHg, non-HDL cholesterol <160mg/dL, and being a nonsmoker.
- Rapid identification of what is working, and what is not, in an individual's treatment plan, along with potential areas of improvement, is essential to preventing adverse diabetes-related outcomes. One way to accomplish this is via a "diabetes distress tool" or pre-visit questionnaire for diabetes specific appointments.

Cost of diabetes in Vermont

- People with diabetes have medical expenses approximately 2.3 times higher than those who do not.
- Total direct medical expenses for diagnosed diabetes in Vermont were estimated at \$362 million in 2017.
- In addition, another \$158 million was spent on indirect costs from lost of productivity due to diabetes.
- Diagnosed diabetes costs an estimated \$520 million in Vermont each year.

Community Perspective


- I had the opportunity to talk with Craig Gratton, a Burlington local living with T2D, on how he believes a pre-visit questionnaire such as the “diabetes distress tool” could optimize his diabetic patient appointments. He greatly appreciated the question (and the multiple answer choices) that asked; “what are the biggest challenges you have in managing your diabetes?” as he felt his challenges are not constant, rather they change from visit to visit. He liked that such a questionnaire would enable the provider to quickly identify and focus on what is currently a challenge, versus something that might have been a challenge in the past, thus using the short time allotted as efficiently as possible.
- I also had the opportunity to talk with Chassidy L. Deslauriers, a certified diabetes educator here in the Burlington area, on the role something like a “diabetes distress tool” could play in optimizing diabetic patient visits. While she emphasized the importance of many of the questions currently on the questionnaire, she especially appreciated the Likert scales. More specifically the question asking the patient to identify with a statement of “feeling overwhelmed by the demands of living with diabetes.” She thought this was a very pertinent question and noted it is something she has come across multiple times while working with this unique patient population.

Intervention and Methodology

- I interviewed a certified diabetes educator (CDE) where I presented a “diabetes distress tool” put together by UVM’s Diabetes Pathway Team to gauge their perception on how a how a pre-visit questionnaire can optimize the patient's time with the provider and improve the visit overall.
- I also utilized the “diabetes distress tool” in multiple patient visits where I then followed up to see how they felt the visit had gone, and if they believed the questionnaire was beneficial in anyway.
- The goal of these interviews was to elucidate, both from professionals who educate this unique patient population, and the patient’s themselves, questions that can be easily asked prior to the visit to rapidly identify areas for improvement in their diabetes treatment. These questions will ideally enable a more fruitful discussion when it comes to the patient-provider interaction, with a goal of ultimately reducing adverse diabetes-related outcomes long term.

Results/Response Data

- Through my time talking with both diabetic patients and a certified diabetes educator I came to find widespread support for a pre-visit questionnaire such as the “diabetes distress tool” pictured at the right. The most popular questions were 3 and 7 with their multiple answer choices and options to fill in the blank. Patients agreed that such a questionnaire would optimize the provider encounter and allow the time to be used as efficiently as possible.


 THE University of Vermont HEALTH NETWORK
 Medical Group
 Your Diabetes Treatment
 Get Ready for Your Visit

Your diabetes care team can help you find a diabetes treatment plan that works for you. Please take a few minutes to answer these questions so your care team will know how to make the most of your visit.

- How long have you had diabetes?
 - Less than 1 year
 - 1 to 5 years
 - 6 to 10 years
 - More than 10 years
- How do you think your diabetes treatment is going?
 - Great- I feel like things are going well
 - Okay- but it could be better
 - Not so good- something needs to change
- What are the greatest strengths you have in managing your diabetes?
 - Taking my medication on the prescribed schedule
 - Checking my blood sugar as recommended
 - Eating healthy
 - Getting regular physical activity
 - Managing stress
 - Problem-solving diabetes challenges
 - Other: _____
- Living with diabetes can sometimes be tough. There may be many problems and hassles concerning diabetes and they can vary greatly in severity. Problems may range from minor hassles to major life difficulties. Listed below are two potential problem areas that people with diabetes may experience. Consider the degree to which each of the two items may have distressed or bothered you DURING THE PAST MONTH and circle the appropriate number.

Please note that we are asking you to indicate the degree to which each item may be bothering you in your life, NOT whether the item is merely true for you. If you feel that a particular item is not a bother or a problem for you, you would circle "1". If it is very bothersome to you, you might circle "6".

	Not a Problem	A Slight Problem	A Moderate Problem	Somewhat Serious Problem	A Serious Problem	A Very Serious Problem
Feeling overwhelmed by the demands of living with diabetes	1	2	3	4	5	6
Feeling that I am often failing with my diabetes routine	1	2	3	4	5	6
- What other things would you like to talk about?

- Do you take your medicines on schedule and as prescribed?
 - Yes
 - No
 - Sometimes
- Do you check your blood sugar on schedule?
 - Yes
 - If yes, please describe when you check your blood sugar
 - No
 - Sometimes
- The last time you got your A1C checked, were you meeting your goal?
 - Yes, my A1C was where I want it to be
 - No, my A1C was above my goal
 - I'm not sure
- What are the biggest challenges you have in managing your diabetes?
 - Taking my medication on the prescribed schedule
 - Checking my blood sugar as recommended
 - Getting to my appointments
 - Eating healthy
 - Getting regular physical activity
 - Managing stress
 - Problem-solving diabetes challenges
 - Paying for my medicines, devices, or supplies
 - Developing complications related to my diabetes
 - Other: _____
- What do you do when you need help managing your diabetes?
 - I call someone on my care team, like my doctor, nurse, dietician, diabetes educator, or pharmacist
 - I ask friends and family
 - I go to an organization in my community
 - I look on the internet
 - I don't know what to do- I feel like I'm in this alone

THE UNIVERSITY OF VERMONT MEDICAL CENTER
 DEPARTMENT/SERVICE NAME

Evaluation of effectiveness and limitations

- Of the multiple patients, providers, and professional educators I talked to about the concept of a pre-visit questionnaire such as the “diabetes distress tool” the response was overwhelmingly in favor of such an implementation.
- In a world ever short on time, asking patients to fill out yet another form is a limitation to this intervention. An alternative could be digitizing the pre-visit questionnaire allowing it to be navigated more quickly or completed at home prior to the visit.

Recommendations for future projects

- I suggest two future projects -
 - One consisting of a large pool of diabetic patients who are interviewed following a visit in which they filled out a pre-visit questionnaire, such as the "diabetes distress tool," to ascertain the perceived effectiveness such an intervention.
 - And a second project interviewing providers who use something along the lines of a "diabetes distress tool" to see if such a pre-visit questionnaire improved the quality of the visit in anyway.

Resources

- American Diabetes Association. Economic costs of diabetes in the US in 2017. *Diabetes Care*. 2018 May;41(5):917–928.
- https://diabetes.org/sites/default/files/2021-11/ADV_2021_State_Fact_sheets_Vermont_rev.pdf
- <https://www.cdc.gov/diabetes/data/statistics-report/preventing-complications.html>
- Dr. Ben Clements – Diabetes Distress Tool