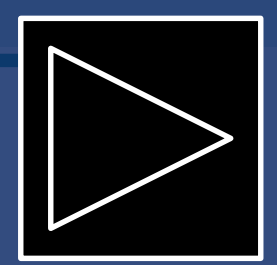


TAP TO GO BACK TO KIOSK MENU

# Shared Medical Group for Diabetes Education

Barbara Luker RN MHA CDE, Barbara G. Rosato DNP ANP-BC CDE



## Introduction/Problem

- ❖ Healthcare Associates (HCA) uses population health tools to identify the total number of patients with Type 2 Diabetes (T2D) and determine if they met recommendations set by the American Diabetes Association. (Standards of Medical Care in Diabetes. Diabetes care 2019 Jan; 42 (supplement 1): S1-S2)
- ❖ We care for about 5,000 patients with diabetes and offer no formalized education program. Most education is done during scheduled visits, some by phone. Many patients visit a diabetes specialist but we see a growing number of patients who do not have the time or means to get this additional care.
- ❖ The American Diabetes Association (ADA) and European Association for the Study of Diabetes (EASD) Consensus report of 2018 recommended all people with T2D be offered access to ongoing Diabetes Self-Management Education and Support (DSMES) programs. Best outcomes were achieved in programs that were theory-based and a structured curriculum with content time of over 10 hours.
- ❖ Our project was **patient-centered**, offering care that is respectful and responsive to individual patient preferences, needs, and values. It also showed **efficiency** by teaching in a group visit to avoid redundancy.

## Aim/Goal

- ❖ Create a monthly group for patients with Diabetes and offer DSMES to enable them to make informed decisions and to assume responsibility for day-to-day diabetes management.
- ❖ Provide education and watch the group to use the information to teach and support each other.
- ❖ During the visit have the Nurse Practitioner (NP) assess and treat patients who report medical issues and titrate diabetes medications to help the patient achieve their A1c goal.
- ❖ Monitor performance measures recommended by the American Diabetes Association.

## The Team

- ❖ Barbara Rosato DNP ANP-BC CDE
- ❖ Barbara Luker RN MHA CDE
- ❖ Edna Henry, Practice Assistant
- ❖ Yvette Duplessis, Phone Staff Representative



## The Interventions

- ❖ Started a Shared Medical Group for patients with diabetes and met once a month for 90 minutes.
- ❖ Leaders included a NP, RN and practice assistant.
- ❖ The NP assessed and treated patients during the visits and made changes to diabetes medications to help the patient improve their A1c.
- ❖ Each group offered education on a diabetes related issue followed by a group discussion where members asked additional questions, discussed feelings, shared coping skills and discussed tools and solutions that worked for them.

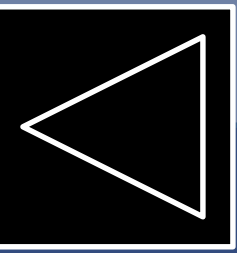
## Progress to Date

### Elements of each Visit:

Data collected: Patients' vital signs, weight, blood work. Patients completed a review of symptoms and set a personal goal to obtain that month.

Theory Based Topics on Diabetes	
Pathophysiology	Complications
Foot care	Goal setting
Diet, meal planning	Dealing with the holidays
Losing weight	Blood glucose testing
Exercise	Dealing with family members
Perseverance, staying motivated	New technology

**For more information, contact:**  
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# Shared Medical Group for Diabetes Education

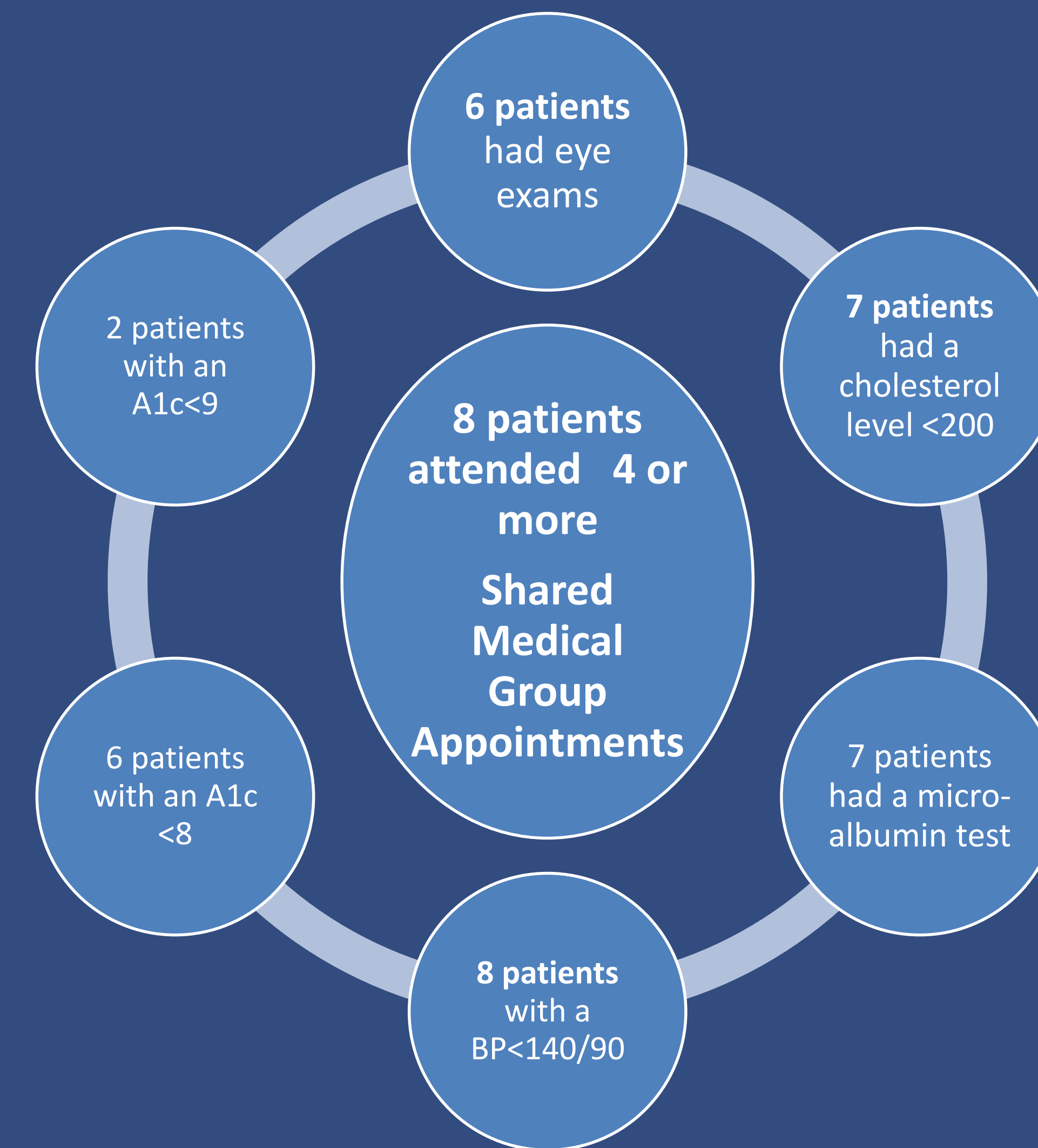
## Lessons Learned- Seeing the magic in group settings

- ❖ The stories told by the patients create a memorable experience for the group that resonates long after the group has ended.
- ❖ Building community takes time but once created can allow patients to share more of their weaknesses and work together to create solutions.
- ❖ Cultural diversity impacts decisions and choices that patients make to manage their diabetes. Having patients sit together in a room to discuss their commonalities is more impactful than giving patients recommendations that are not culturally sensitive.
- ❖ Changing habits takes education, time and practice.

Banana Bread	
*Facts for 1 slice, recipe makes 16	
Nutrition Facts	
Amount Per Serving	
Calories 234	
	% Daily Value*
Total Fat 12.1g	19%
Saturated Fat 6.5g	33%
Cholesterol 20mg	7%
Sodium 303.8mg	13%
<b>Total Carbohydrate 29.9g</b>	<b>10%</b>
Dietary Fiber 1.5g	5%
Sugars 14.9g	
Protein 3.4g	7%
Vitamin A 1%	Vitamin C 3%
Calcium 10%	Iron 9%

Shared stories, laughter and understanding, lots of empathy, pearls of wisdom. The take-home messages are relatable and crystal clear.

## Patient Outcomes



There were **13 total** attendees.  
 On average **6 patients** were present in the group

## Next Steps

- ❖ Advertise the group to patients and providers in Healthcare Associates
- ❖ Replicate the group and offer it at another time to enhance patient choice. Use the same curriculum so patients could attend either group to avoid scheduling conflicts.
- ❖ Use the Confidence in Diabetes Self-Care Scale (CIDS) to collect information from patients as a measurement tool when they start the group and measure again after 6-12 months.

**For more information, contact:**  
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