Did You Know...?

"a patient-centered collaborative model of care recognizing patient autonomy provides a more skillful approach to improving diabetes self-care behaviors..." Alan M. Delamater



Diabetes

People with diabetes** may not get their recommended care...

- Cost: Per the American Diabetes Association, in 2007 people with diabetes have medical expenses about 2.3 times higher than people without diabetes. Co-pays, polypharmacy costs and lost work days add up.
- A focus on sick care: Patients may delay needed care if they equate doctor visits with being ill. The paradigm shift from sick care to wellness and preventive thinking can be difficult.
- Different agendas: You know the treatment plan and goals but the patient doesn't understand or agree. Their lack of understanding can result in "non-compliance".
- Social determinants of health: Transportation issues, non-English speakers (or English as a second language), low literacy, limited understanding of the disease process and necessary care, poor health literacy, and lack of social support all play a role when seeking or avoiding medical care.
- Inconvenient office hours: More visits means more time off work or use of sick time or vacation days.

Create a partnership with your patients...

Dialogue, don't monologue.

Talk with them about their concerns related to costs and lost work time. Collaborate with clients on a plan of care that addresses their individual concerns.

Create buy-in.

Give them "permission" to see you when they are well. Preventive care can help reduce cost, prevent loss of work and other problems resulting from unchecked diabetes.

Adult learners:

Use adult learning principles. Ask questions such as "Why do you think this might be important to you?" Make it relevant to their situation.

Know their life circumstances.

Really listen! Look directly at your patient (not a laptop or chart). Listen for problems with transportation, language barriers, and health or low literacy.

Have low literacy or languages other than English educational materials in the waiting and exam areas. NDEP has a multitude of such resources.

 Reserve first or last appointments of the day as "diabetes" slots.

Reference: Delamater, A.M., Improving Patient Adherence. Clinical Diabetes, April, 2006, vol. 24 no.2, pp. 71-77.

** Diabetes is a disease in which the body does not produce or use insulin properly. Insulin is a hormone that is needed to convert sugar, starches and other food into energy that is needed for proper bodily functioning.

