



Diabetic Patient Satisfaction at a Patient Centered Medical Home

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Special thanks to....

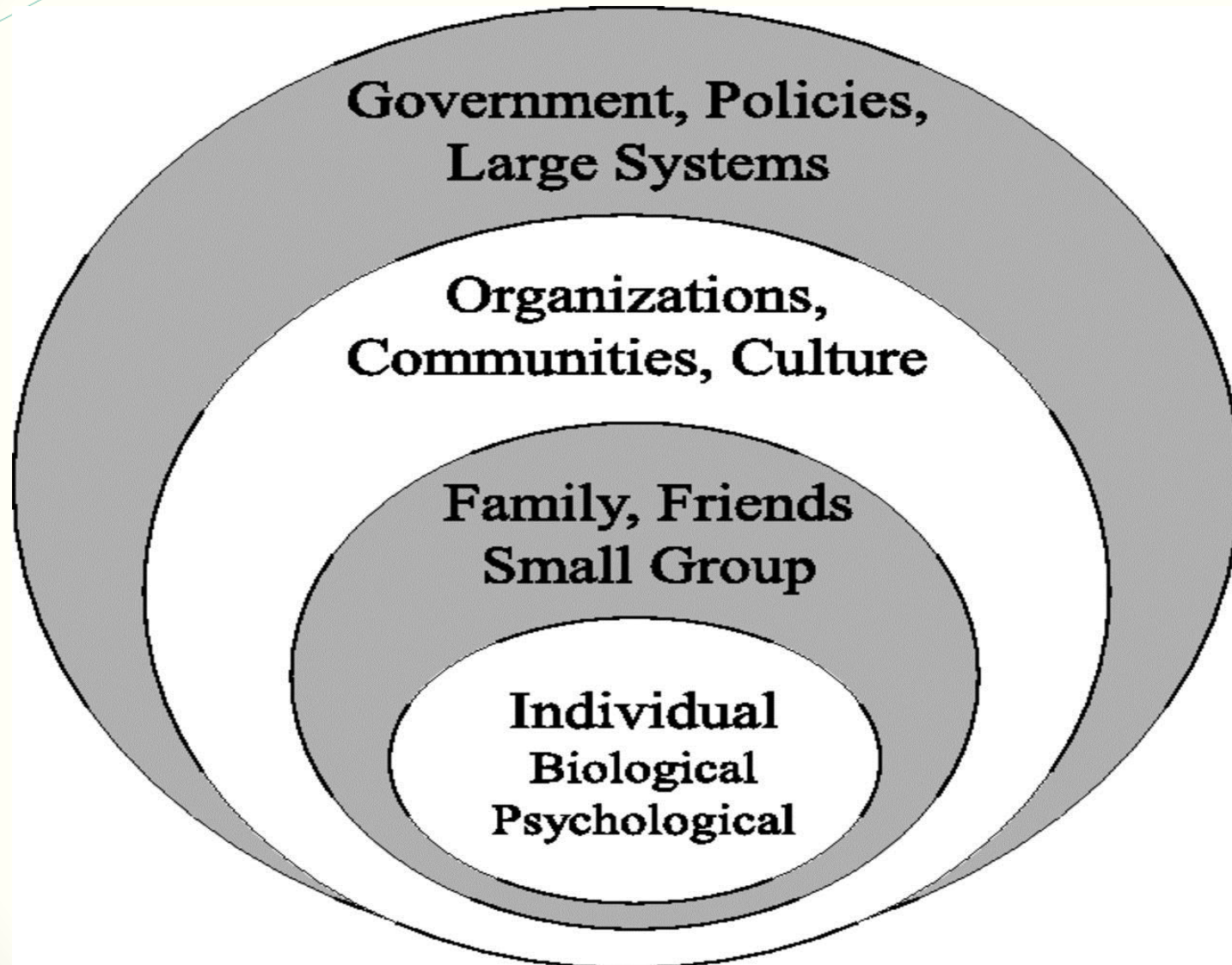
- The GE Foundation
- The National Medical Foundation (NMF)
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- D. Lee Wilson, for giving me a place to stay while in Nashville



Background

- Physician-patient interview considered key component of all health care
- Multi-staff primary care sessions were associated with better patient outcomes
- Importance of examining complexity of self-care, patient cultural behaviors, education and beliefs
- Examining primary care visits important and critical interaction to examine when evaluating diabetic patient outcomes

Ecological model of health behavior





Purpose

- To examine diabetic patient satisfaction, education and adherence to self-care recommendations following a visit to a UNHS clinic during a two month period (June 10 – August 5 2013)
- Eleven item telephone survey was used to elicit the patient's responses to the study variables



Survey Administration

- Patients called between 10 and 7 CST, unless pt asked for a call-back at another time

Patients told:

- Goal of survey
- Survey confidential
- No right or wrong answer
- Declining to participate would not affect their clinic care



Demographics

- N =113, 54 responses
- 35 F vs. 18 M
- Age categories:

31-35: 4

36-40: 3

41-45: 2

46-50:4

51-55: 12

56-60: 10

61 +: 19

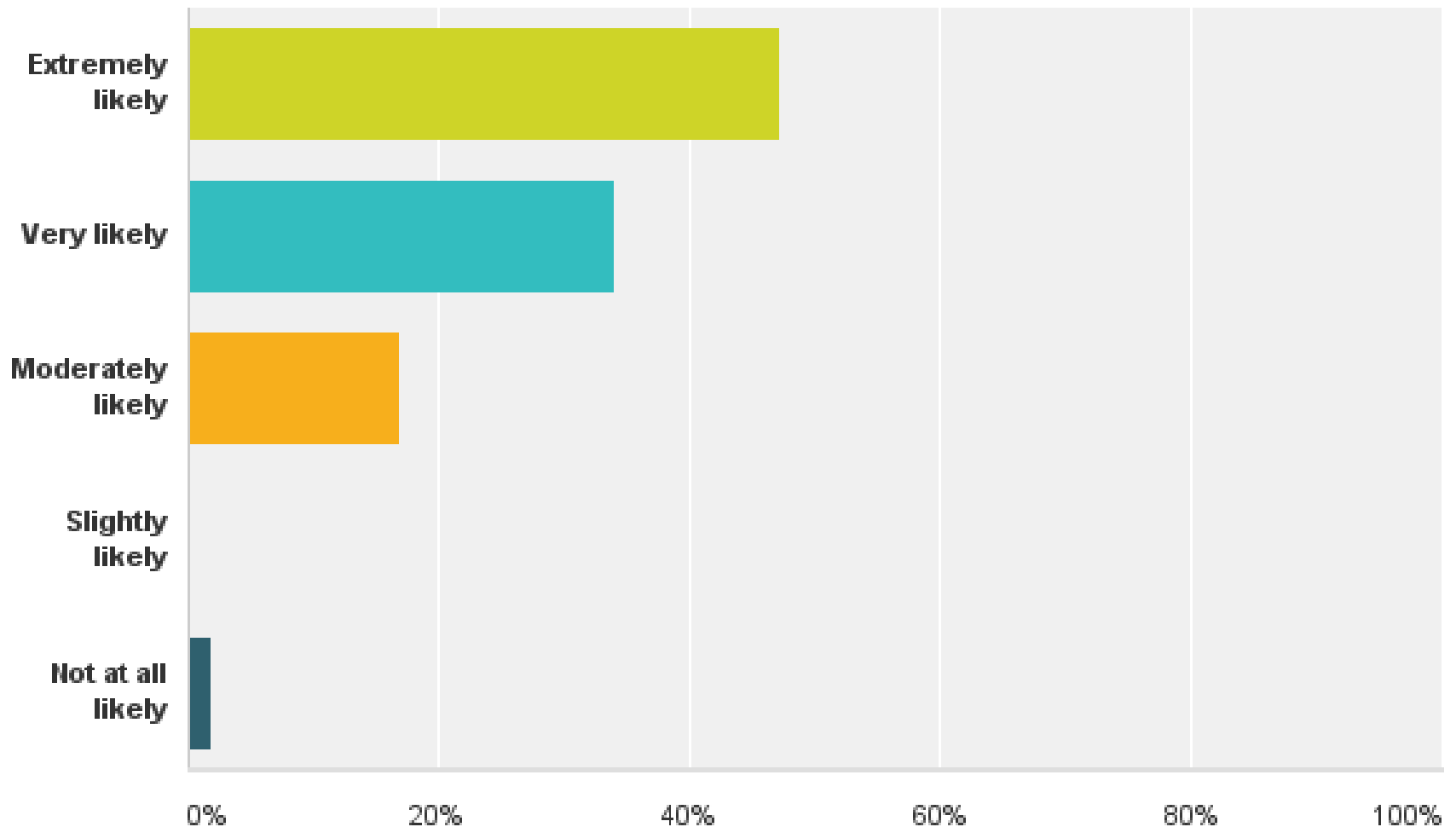


Survey Results & Findings

- 3 Spanish speakers
- 8 declined to participate
- 10 could not be reached due to defunct number
- 47.7 % of inquiries resulted in completed survey
- 8/11 questions used 5 scale Likert rating
- Overall, most happy to participate, eager to give input about the clinic

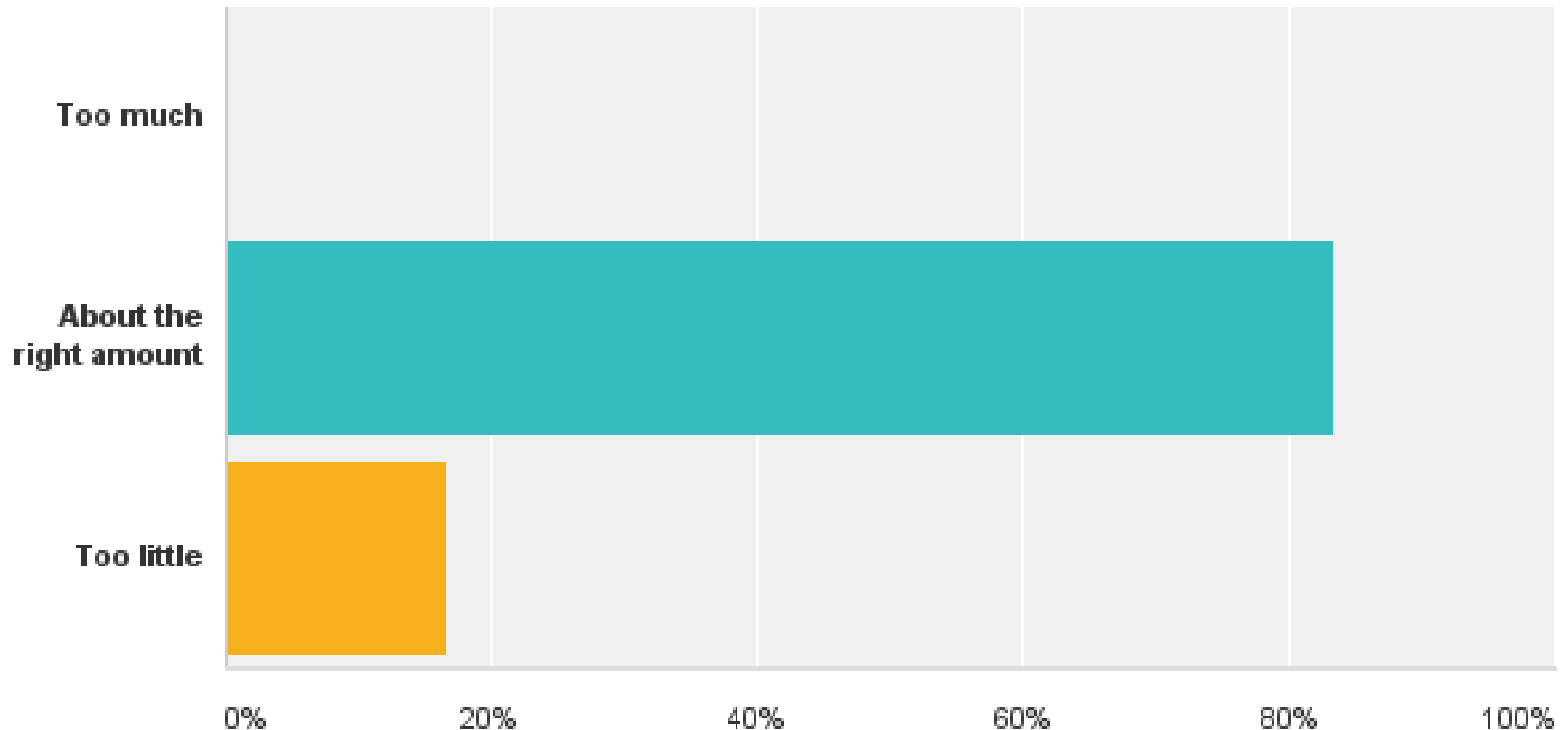
Q1 How likely are you to recommend the clinic to family or friends?

Answered: 53 Skipped: 1



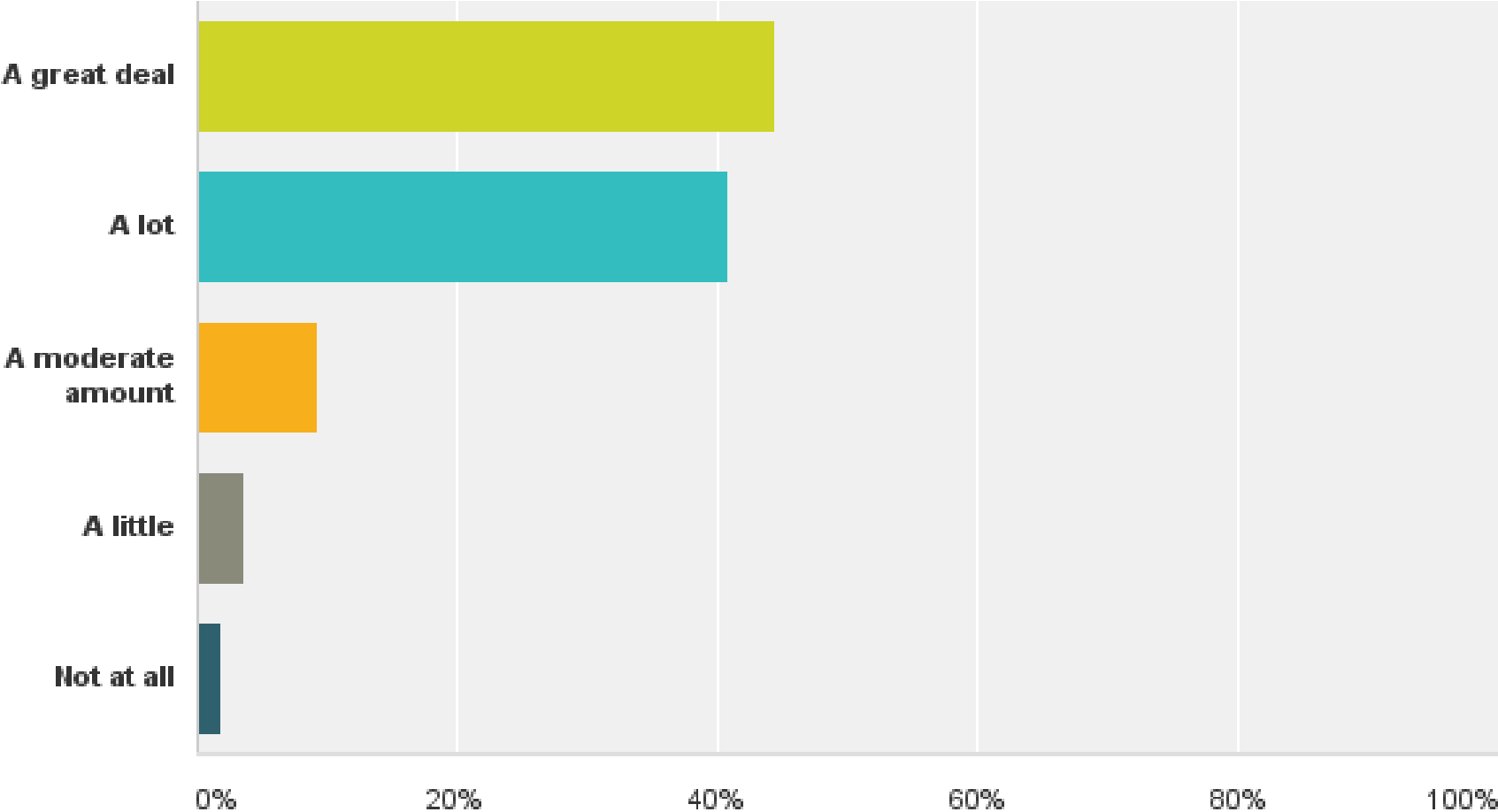
Q2 During a typical office visit, does your practitioner spend too much time with you, too little time with you, or about the right amount of time with you?

Answered: 54 Skipped: 0



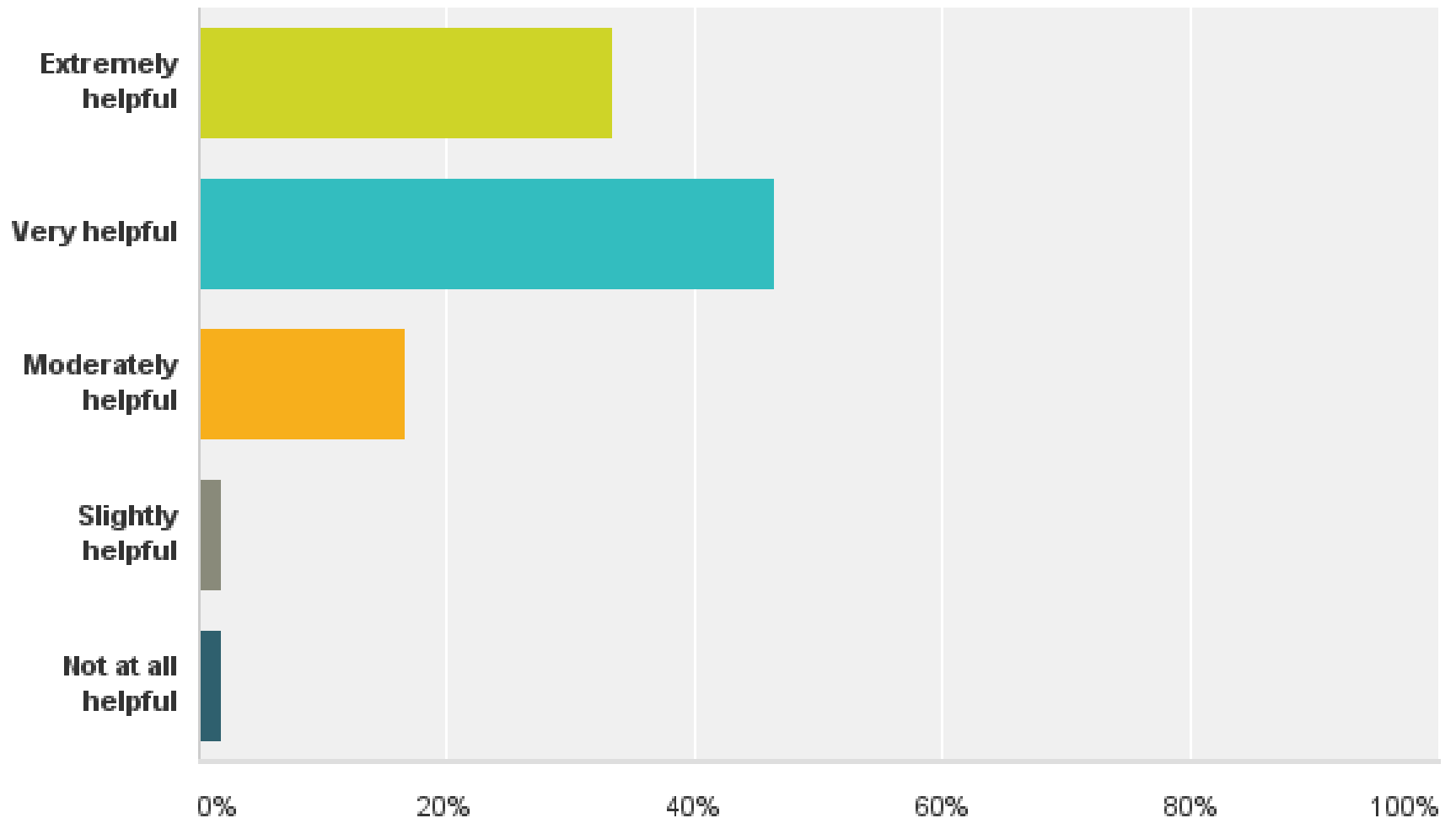
Q3 How much do you trust your doctor to make help you make medical decisions that are in your best interests?

Answered: 54 Skipped: 0



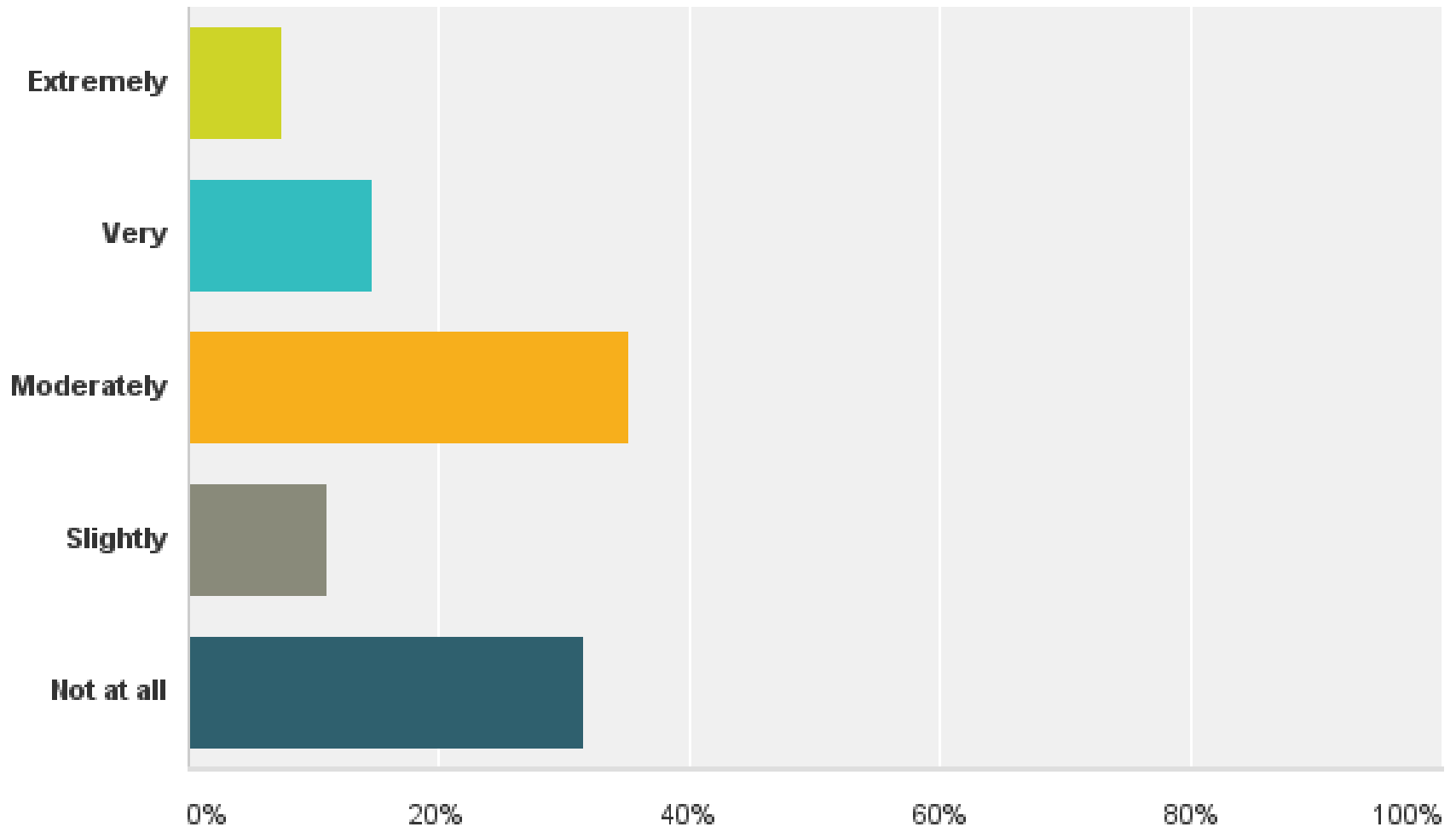
Q4 How helpful is your practitioner at explaining your diabetes?

Answered: 54 Skipped: 0



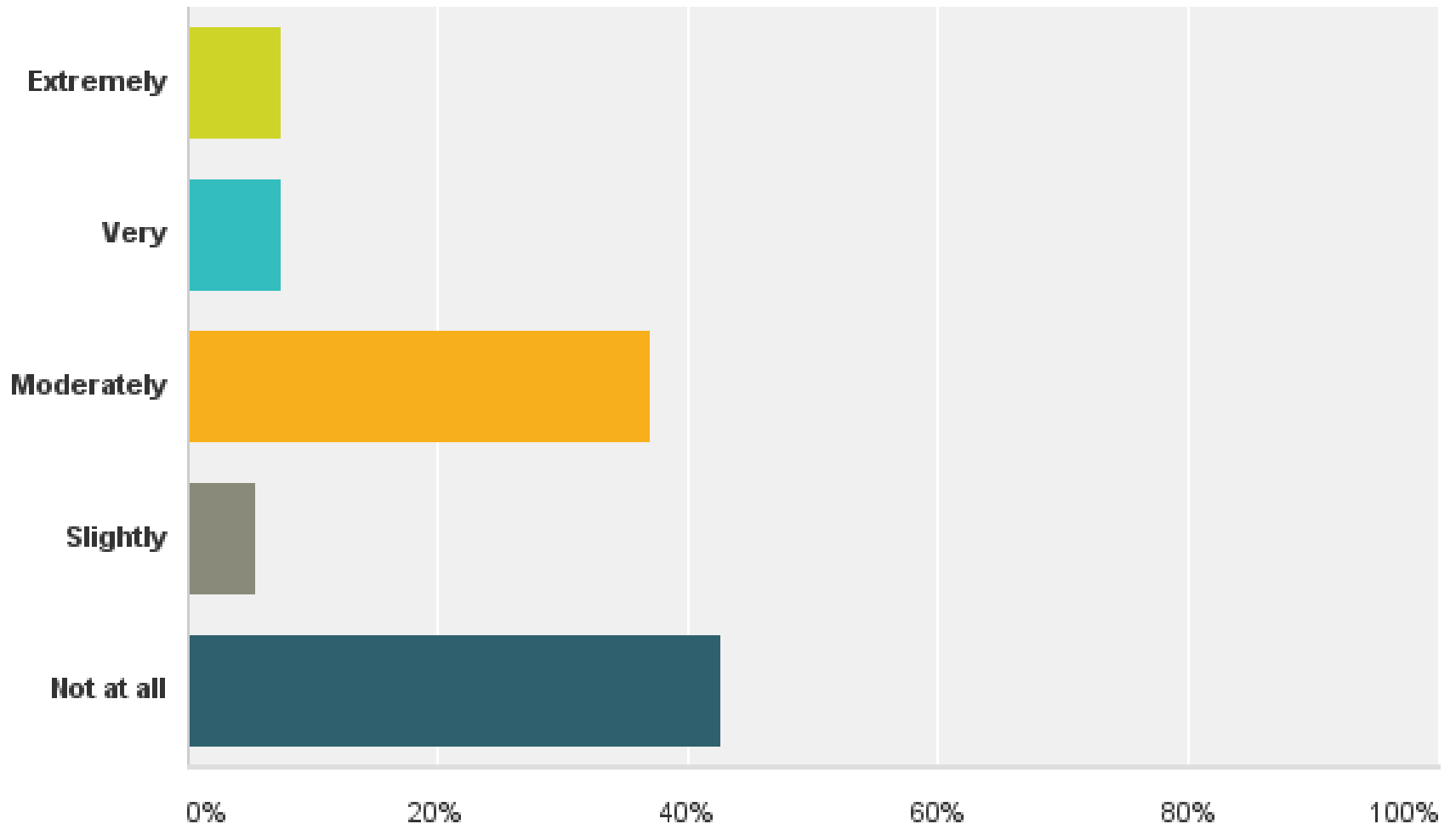
Q5 Have you made changes to your diet since last coming to clinic?

Answered: 54 Skipped: 0



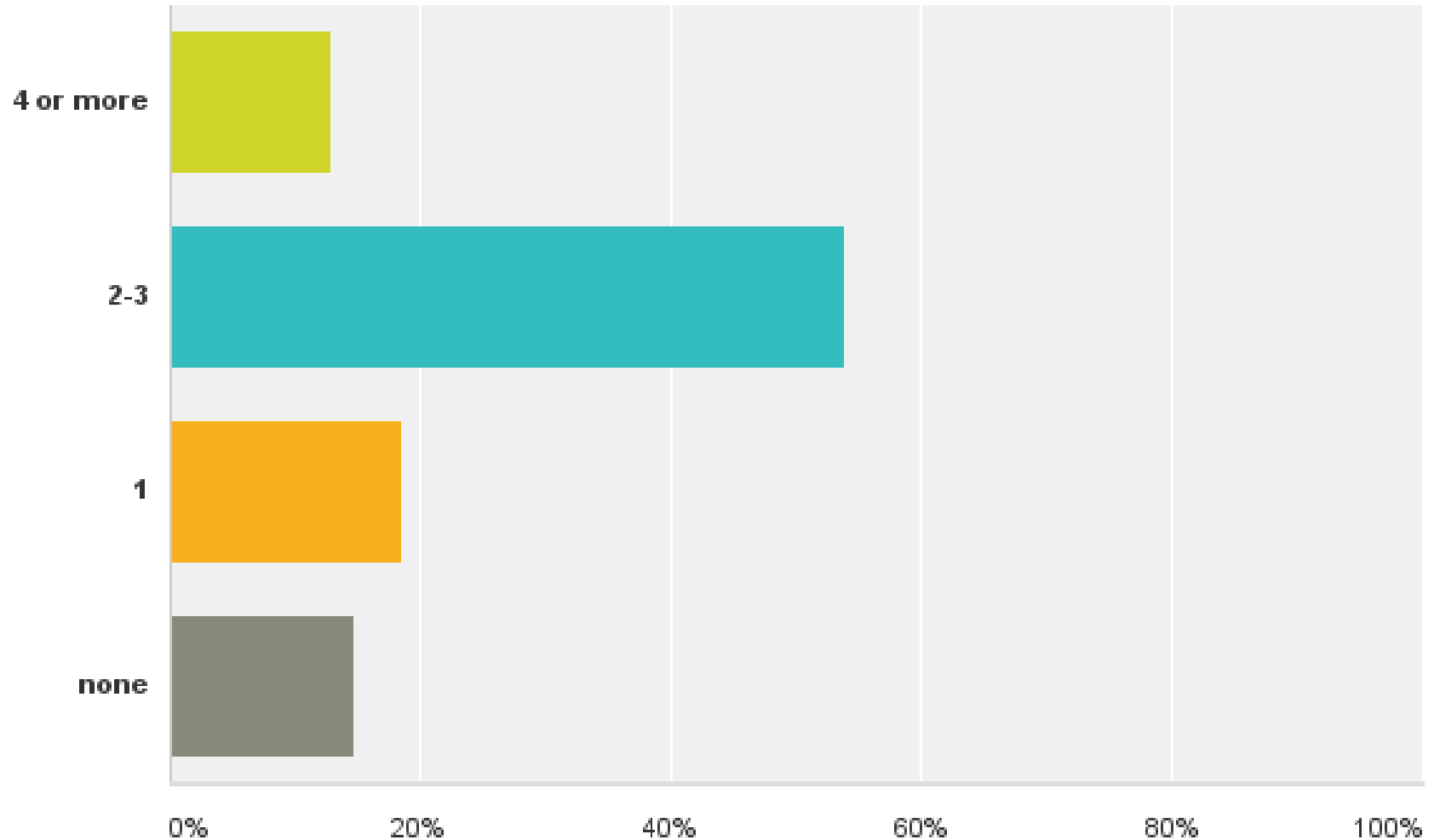
Q6 Have you increased your physical activity since last coming to clinic?

Answered: 54 Skipped: 0



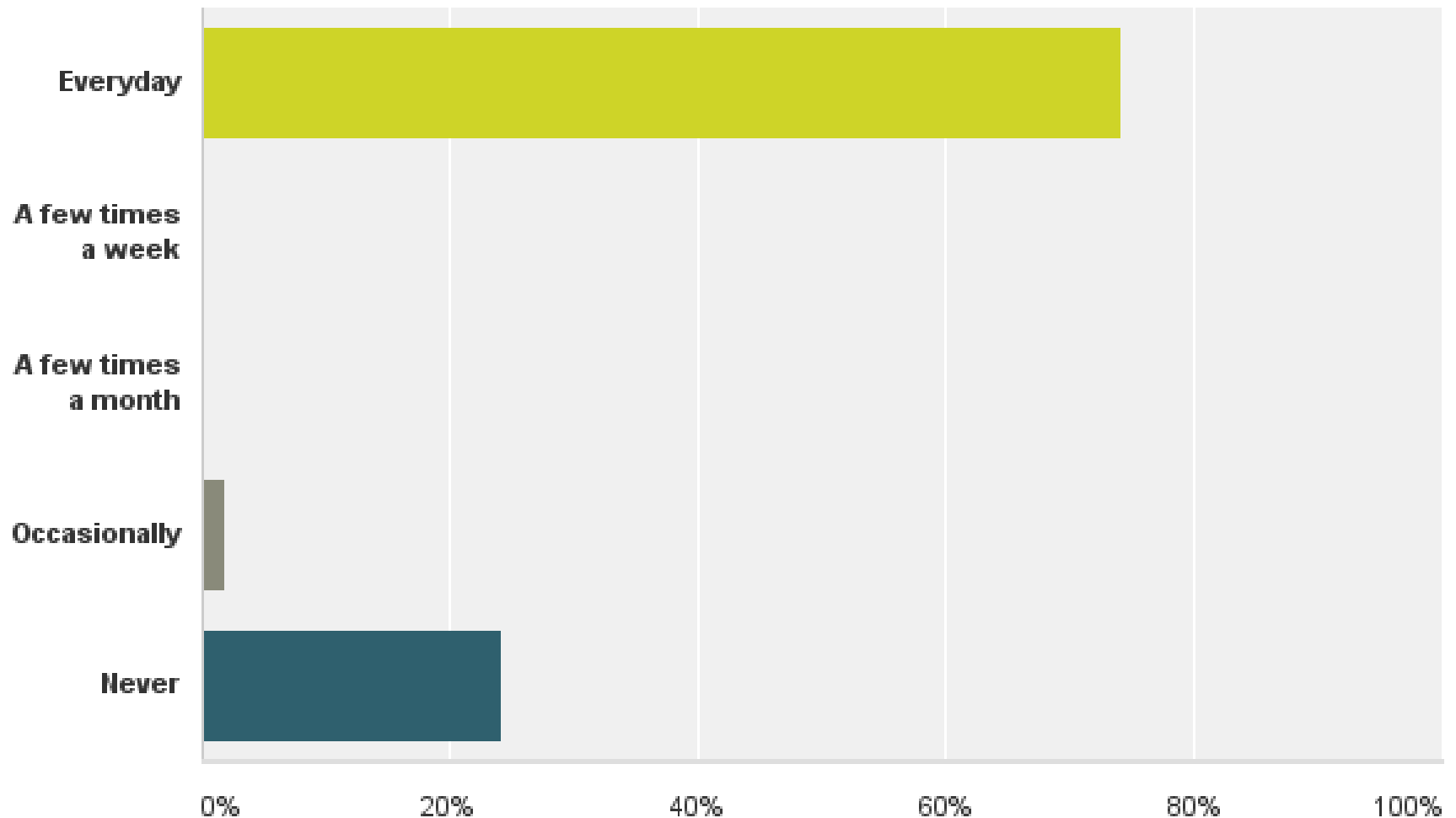
Q7 How many times a day do you check your blood sugar?

Answered: 54 Skipped: 0



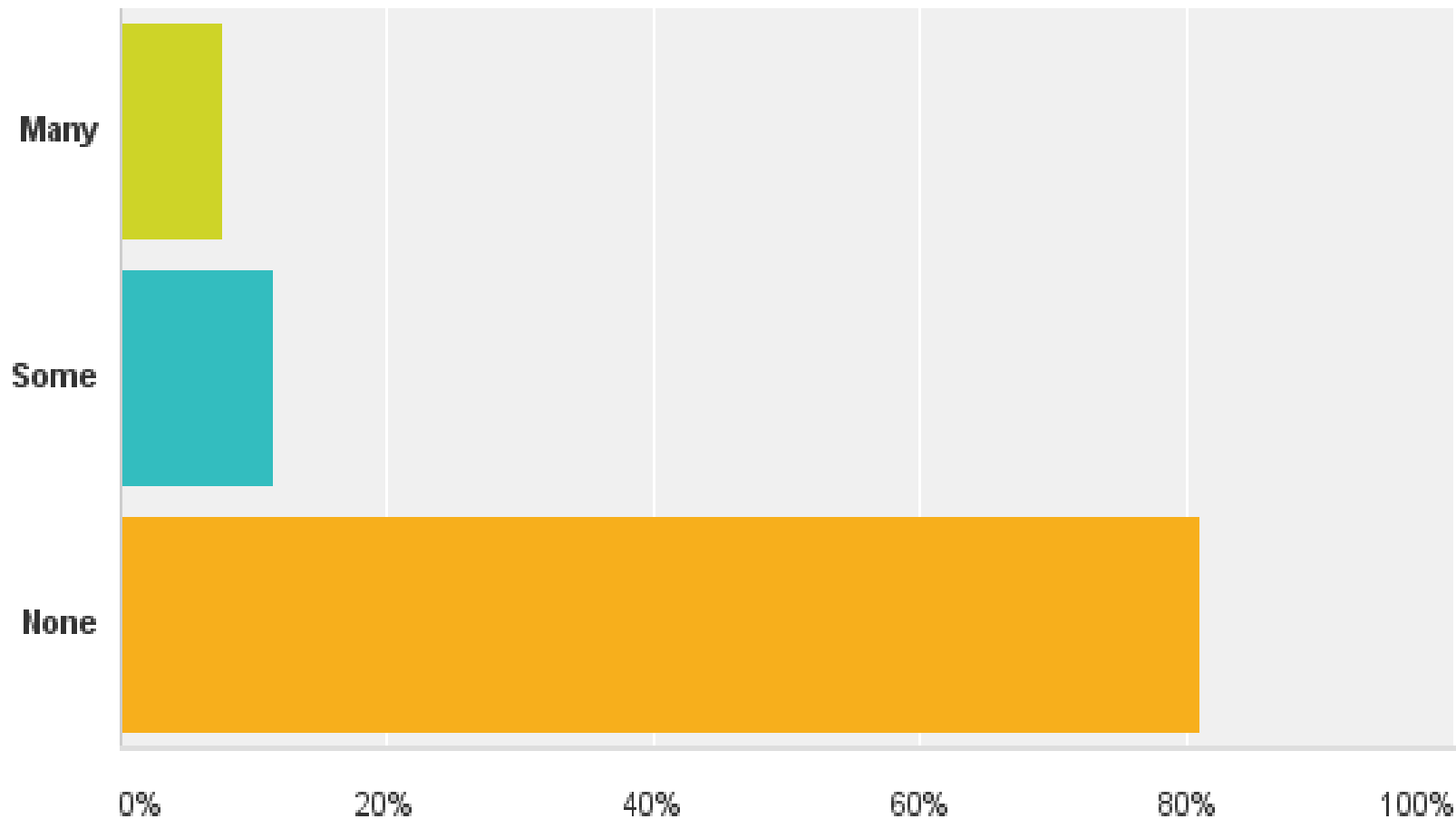
Q8 Do you record your blood sugar in a log (either on paper or on a monitor)?

Answered: 54 Skipped: 0



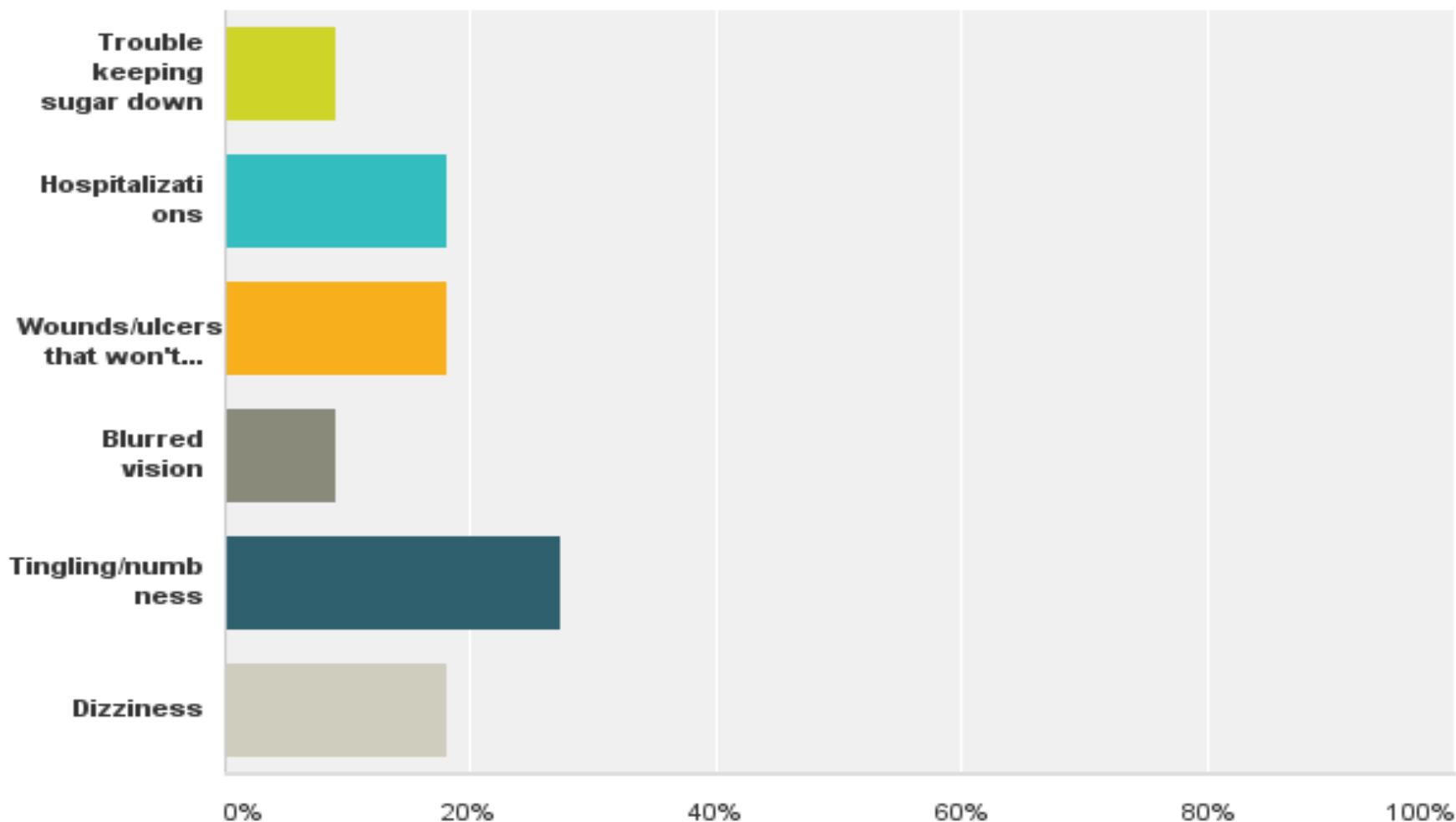
Q9 Have you had complications from your diabetes since your last visit?

Answered: 52 Skipped: 2



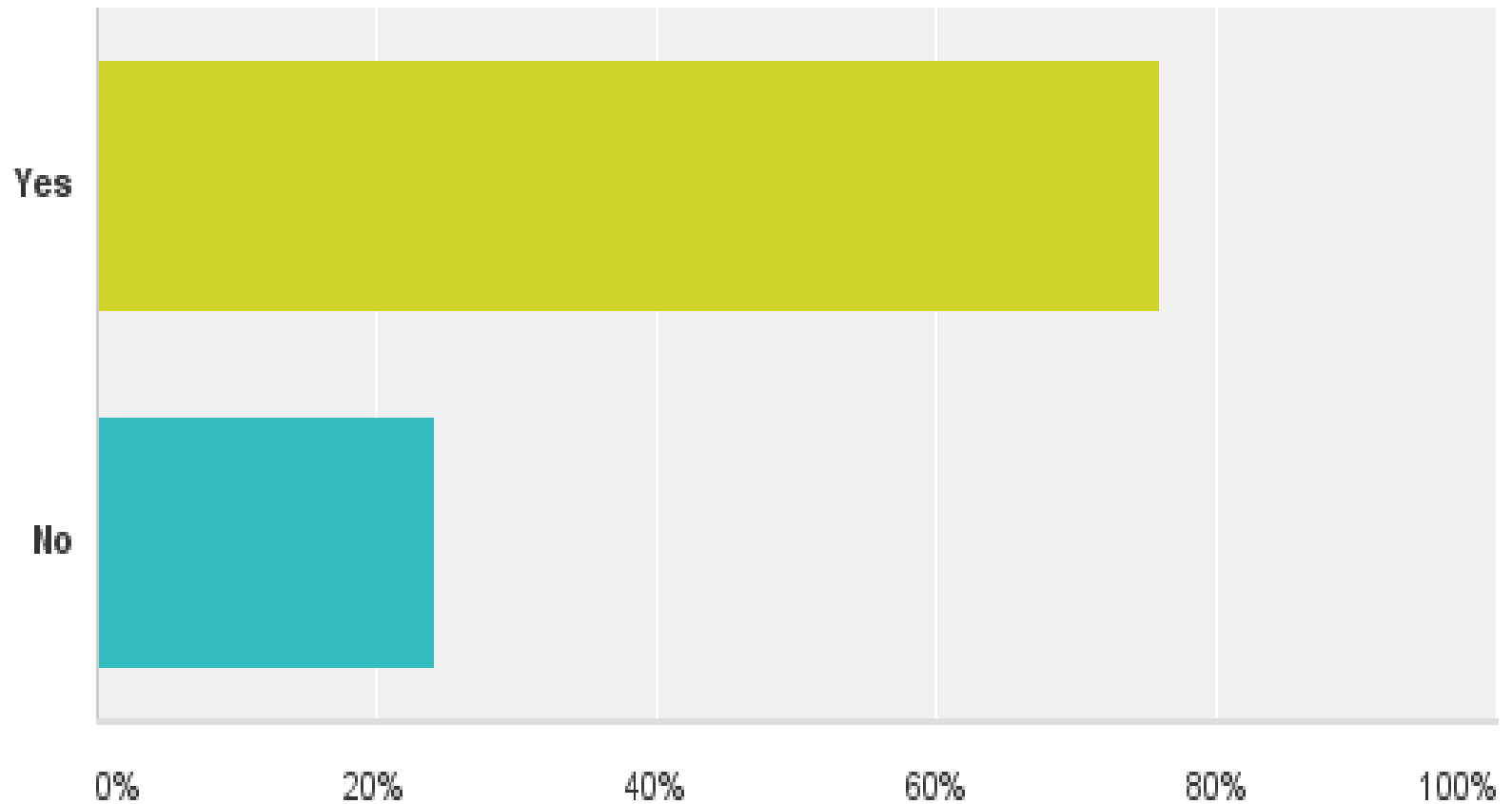
Q10 If so, what kinds of diabetes complications have you had since your last visit?

Answered: 11 Skipped: 43



Q11 Did you see or speak with the diabetes coordinator or nutritionist at your last visit?

Answered: 54 Skipped: 0





Limitations

- Brief time period, small n
- Ethnicity and race not identified
- Almost 10% of patients had contact telephone numbers no longer working, unable to accept calls
- Limited ability to observe nonverbal cues, or verify information
- Limited by discrete questions queried: little room for individualized input*
- Larger number of older patients (61+)



*Some personal comments

The good:

- Gratitude for Nancy, Katie, and Amy
- Liked nutrition counseling
- Loved yoga offering

The bad:

- “Bad experience” at Waverly
- Disliked diabetes coordinator
- Changed clinics due to dissatisfaction
- “Don’t take time” to understand individualized care
- Inability to have major health issues related to diabetes addressed



Conclusions

The majority of patients:

- Would recommend the clinic
- Feel they get enough time with the provider
- Find the provider trustworthy and helpful
- Check and record their blood sugar regularly
- Have suffered no diabetic complications since last coming to clinic



Conclusions continued

Many patients:

- Haven't changed their diet or exercise significantly (defined as very/extremely on Likert scale)
- Expressed confusion about the role and identity of the diabetes coordinator, nutritionist



Recommendations

- Reiterate the importance of checking blood sugar and recording values daily
- Help patients better define how they can incorporate dietary changes and increase physical activity
- Increase presence and role of diabetes coordinator, nutritionist
- Encourage patients to make sure they have an active telephone number for follow up calls



References

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