Diabetic Patient Satisfaction and Education at Good Samaritan Atlanta

Anna Mistretta, MD, MPH, MS
Mercer University SOM
Abstract

The purpose of this study was to examine diabetic patient education and adherence to self-care recommendations following participation in a series of four diabetes classes provided by Good Samaritan patient centered medical clinic in Atlanta, Georgia. A pre and post multiple choice question question survey was used to elicit the patient’s responses to study variables.
Literature Review

• Diabetic patient’s interaction and satisfaction with the primary care team during clinic visits is critical for follow-up care and management of the disease

• Diabetic patients must follow specific daily regimens for diet and blood sugar testing and keep accurate records of these results

• This record facilitates appropriate management by providing the patient and the physician with valuable information
Background

Diabetic patient’s interaction and satisfaction with the primary care team during clinic visits is critical for follow-up care and management of the disease. Diabetic patients must follow specific daily regimens for diet and blood sugar testing and keep accurate records of these results. This record facilitates appropriate management by providing the patient and the physician with valuable information related to variations in blood sugar and the patient’s understanding of diet and other health related recommendations for diabetic care.
About Good Samaritan

Good Samaritan is a patient center medical home located in inner city Atlanta, Georgia. The clinic serves patients from all walks of life, and provides a myriad of services from medical to dental to mental health to patient education. More than 400 professionals volunteers and students assist in providing services at the clinic each year.
Objectives

- To deliver a series of diabetic education classes to Good Sam patients
- To assess whether the diabetic education classes improved disease knowledge
- To brainstorm ways to increase diabetic class enrollment and knowledge in the future
Methods

• Patients who were seen for diabetic classes from January 2013 from February 2014 were given the same pre and post class survey to complete corresponding to each of the four education classes of the series.

• Questions ranged for each class, depending upon the focus.

• The focus of each question of the quiz corresponding to the class was to have participants recognize key components of the class content correctly.
Glucose is a source of energy for the body.
T or F

When you eat, the pancreas produces insulin.
T or F

Insulin removes glucose from the bloodstream into cells to be used and stored.
T or F

If you go for long periods of time without eating, you will NOT have high blood glucose levels.
T or F

In the States of Change Model, contemplation is when you consider making changes.
T or F
Carbohydrates are the body’s primary source of energy.  
T or F

Protein is NOT important for growth and maintenance of the body.  
T of F

All fats in food are bad for you to eat.  
T or F

Fiber helps you maintain a healthy weight and is found mainly in fruits, vegetables, whole grains and legumes.  
T of F

A portion size is the same thing as the recommended serving size on MyPlate.  
T or F
Results

• It was difficult to draw far-reaching conclusions using the survey, as different participants came to different classes, and the sample size was small

• For each of the four quizzes I examined, pre survey scores ranged between 40 and 60% correct

• Upon completion of the course, post survey scores ranged from 80 to 100% correct
Survey Comments

• Patients completing an assessment of the class reported that they felt more knowledgeable about their disease and how to manage it
• Many participants reported greater confidence in being able to plan wise nutritional options for diabetic management
• Other participants praised the knowledgeable staff and informative class material.
Survey Comments, Con’t

• Criticisms included the preclass breakfast, and the fact that the class was divided into four sessions instead of just being one comprehensive class.

• Some participants listed that the worst thing about the class was the fact that they had diabetes or prediabetes.

• Others expressed displeasure at learning of diabetic complications and seeing visuals associated with diabetic complications.
Conclusions

Upon reviewing the results of the survey, it is clear that the majority of patients:

• Would recommend the clinic diabetes classes
• Are more knowledgeable about diabetes after the completion of each class
• Feel they get enough time with the provider(s) during the class
• Find the class provider(s) trustworthy and helpful
Recommendations

• Make sure practitioners reiterate to patients how important it is to check blood sugar, and to record the values, daily

• Help patients better define how they can incorporate dietary changes and increase physical activity

• Continue the presence and role of a diabetes coordinator and nutritionist

• Continue to explore how to increase participant enrollment in the class