



DIABETES CASE MANAGER INTERVIEW GUIDE

Engaging the Individual Patient With Diabetes

INTRODUCTION

Diabetes is a complex condition that requires a multidisciplinary approach among healthcare providers, coordination of care along the diabetes care continuum, and patient commitment to a care plan.¹ As a case manager, you are not only in a position to support your patients with diabetes to help them achieve or maintain glycemic control and to help reduce the risk of developing diabetes-related complications, but you also play a key role in facilitating the care coordination among your patients and the other members of their healthcare team.

By engaging your patients on an individual level, you may be able to foster a shared decision-making approach, where you mutually exchange important information regarding diabetes care.² Placing patients at the center of care and involving them in healthcare decisions may enhance adherence to therapy.² The following interview guide provides potential interview questions and tips modeled after the American Association of Diabetes Educators (AADE) recommended self-care behaviors to help you engage your patients and understand their behaviors so you can actively manage their care.



AADE7™ Self-Care Behaviors³

- Healthy eating
- Being active
- Monitoring blood glucose
- Taking medication
- Problem solving
- Healthy coping
- Reducing risks

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HEALTHY EATING

Ensuring that your patients are making healthy food choices is vital to successful diabetes management.³ It is important to educate your patients about these key points that someone with diabetes should understand: carbohydrate counting, fat control, reading labels, planning and preparing meals, and learning about the effect of food on blood glucose.³ A nutritious diet and weight loss may help patients achieve their goals for blood glucose, A1C, cholesterol, triglycerides, and blood pressure.^{1,3} However, since every patient is different, it's important to assess each individual to develop the best management approach possible.¹ You may also want to consider whether a referral to a plan-sponsored dietitian is appropriate.¹

Here are some helpful questions to ask your patients about their current nutrition routines:

- ☐ How many times do you eat each day?
- ☐ What do you typically eat for breakfast, lunch, and dinner?
- ☐ What kind of effect do you think your diet has on your diabetes?
- ☐ Can you explain your meal plan?
- ☐ What do you like/don't like about your meal plan?
- ☐ How well is your meal plan working for you?
- ☐ Can you tell me which foods and beverages you should avoid?
- ☐ How can I help ensure that your meal plan reflects your cultural background?
- ☐ How can I help you reach your goals?

HEALTHY EATING TIPS FOR YOUR PATIENTS⁴:

- Trade a high-fat food for a low-fat choice each week.
- Make your meal appear bigger by serving it on a smaller plate.
- If you eat at a restaurant, make sure you get half of your meal "to go."
- Drink a glass of water 10 minutes before each meal to help curb your appetite.
- Wait 20 minutes after finishing a meal to determine if you're still hungry, since it takes that long for your brain to know you're full.
- Do not eat in front of the TV, since people tend to eat more while watching.

BEING ACTIVE

Exercise is a very important activity for your diabetes patients.^{1,3} It helps improve glycemic control, body mass index, and weight management and also reduces stress and helps control lipids and blood pressure.^{1,3} Make sure patients speak with their doctors or healthcare providers before beginning any exercise program.¹ For those unable to engage in traditional exercises, simple activities such as vacuuming, parking farther from a store, taking the stairs over the elevator, and washing windows can be beneficial.⁴ Be sure to ask your patients to log their activities to show progress. Suggest working out with a friend to make it more enjoyable and improve compliance.⁴ Also, instruct your patients to stay hydrated, monitor blood glucose, and check their feet following any exercise.⁴



Here are questions to ask your patients about their exercise/activity routines:

- ☐ On a scale of 1 to 10, how fit would you describe yourself?
- ☐ What types of exercise do you do every day?
- ☐ Can you describe your exercise program for me?
- ☐ How well do you think your exercise program is working?
- ☐ Are there things that get you off track?
- ☐ Do you have any specific problems with your exercise program or any issues of concern?
- ☐ How well do you feel the activities in your program match your interests?
- ☐ What are your exercise goals and have you been able to attain them?
- ☐ If you are having trouble meeting your goals, how can I help?
- ☐ How else can I help?

MONITORING BLOOD GLUCOSE

Making sure your patients self-monitor plasma or blood glucose (SMBG) is a vital part of managing diabetes.³ Monitoring blood glucose will help your patients evaluate how well they're managing their diabetes.³ This process will enable your patients to assess whether their diet, exercise plan and medication are helping them reach their goals.³

The American Diabetes Association (ADA) suggests the following glucose levels for many adults with diabetes¹:

- Before eating (fasting plasma glucose): 70-130 mg/dL
- 1-2 hours after eating (postprandial plasma glucose)*: <180 mg/dL

*Postprandial glucose may be targeted if A1C goals are not met despite reaching preprandial glucose goals.

These goals should be individualized. Be sure to discuss with your patients' doctors and healthcare providers what number is right for them.¹

Consider asking the following questions to assess your patients' ability to monitor their blood glucose:

- ☐ What kind of equipment and supplies do you have to self-check your blood sugar?
- ☐ How often has your doctor/healthcare provider instructed you to check your blood sugar?
- ☐ What helps you remember to check it and what gets you off track?
- ☐ Do you keep a blood sugar log book?
- ☐ Do you bring your log book to your doctor visits?
- ☐ How well do you think you are controlling your blood sugar?
- ☐ How else can I help?



TAKING MEDICATION

For patients who have proven unsuccessful in making lifestyle changes, such as nutrition and exercise, medication may be used in conjunction with diet and exercise.¹ If prescribed, medication adherence is important for successful outcomes in diabetes.³ For each medication, patients should be informed of the dosage, timing and frequency of administration, potential side effects, mechanism of action, and storage instructions.³ A discussion reaffirming the importance of staying compliant should be scheduled with your patients during each encounter.



Consider asking the following questions to assess medication adherence:

- ☐ How did your doctor (or healthcare provider) tell you to take your medication?
- ☐ Can you tell me what your medications are for and how they help you?
- ☐ How do you think the medication is helping you control your blood sugar?
- ☐ How often do you miss taking your medications?
- ☐ What happens that causes you to miss taking your medications?
- ☐ Can you explain any difficulty you have taking your medications?
- ☐ If you have had any problems getting your medications, what were they?
- ☐ What questions do you have about medications?
- ☐ How else can I help you?

PROBLEM SOLVING

Diabetes is a journey for patients and can change daily. Emergencies can happen, and it is important to problem solve and make adjustments. One example is when a patient suffers a hypoglycemic event. The signs and symptoms you, the patient, and caregivers should be aware of include⁴:

- Dizziness or shakiness
- Nervousness
- Rapid heartbeat
- Trouble concentrating
- Headache
- Irritability, moodiness, or anger
- Sweating
- Tingling in the face or lips
- Extreme hunger

If patients experience these symptoms, they should be instructed to take immediate steps if their blood sugar is too low (plasma glucose <70 mg/dL). Recommended instructions include¹:

- Eat 15-20 grams of glucose (sugar) or simple carbohydrates (for example, 2 tablespoons of raisins or 1 tablespoon of honey) and check your blood sugar again after 15 minutes.
- If your blood sugar is still low, repeat this step.
- Once your blood sugar returns to normal, eat a small snack if your next planned meal or snack is more than an hour or two away.

If a hypoglycemic event occurs multiple times, the patient should consult a physician for evaluation.¹

Beyond a hypoglycemic event, problem solving is an important skill for you and your patients to work on together, since it spans all of the elements involved in diabetes management.³

Consider the following questions to foster a problem-solving dialogue with your patients:

- ☐ Have you experienced any problems with any aspects of your diabetes care? If so, what have you experienced?
- ☐ What is working well and what is not working?
- ☐ Is there anything you would like to change about your diabetes care? If so, can you explain what you would like to change?
- ☐ How well are you doing on your nutrition and exercise plans?
- ☐ Do you keep a food or exercise journal?
- ☐ Can you explain how your doctor or healthcare provider instructed you to take your medication?
- ☐ How important do you think it is to keep track of your next exam/test (ie, A1C, lipid screening, foot exam, dental exam, etc.)?
- ☐ How else can I help you?

HEALTHY COPING

Diabetes is a difficult disease that requires patients to make many challenging changes, which may go against many of their long-established lifestyle routines.³ Such changes can seem overwhelming to many patients and require better coping skills. Find out if there are any barriers that may make it difficult for them to do this. Then customize your care to help them overcome those barriers.³

By focusing on diabetes as a manageable condition and reminding your patients that their diabetes does not define them as an individual, you may be able to help guide them to think positively and help them cope. Family and friends may be a great support system to help your patients.¹



Consider asking the following questions to help determine how your patients are coping:

- ☐ How are you coping with diabetes?
- ☐ Do you believe that, with the right support from your care team, you can help yourself succeed?
- ☐ How are you doing coping with lifestyle changes, such as eating healthier and exercising?
- ☐ What challenges have you faced in making those changes?
- ☐ How does having diabetes make you feel?
- ☐ Do you think you're doing a good job managing your diabetes? Why do or don't you feel that way?
- ☐ How helpful is the support from your care team?
- ☐ How else can I help you?

REDUCING RISKS

Risk reduction behaviors may help reduce diabetes complications.³ Interventions such as smoking cessation and regular eye, foot, and dental examinations are important components to diabetes management.³ Help patients learn about diabetes standards of care, their individual therapeutic goals, and preventive care services to help decrease potential risks.³ Reiterate the importance of diabetes management actions patients can do on their own such as³:

- blood glucose self-monitoring
- personal care record keeping
- blood pressure monitoring
- weight management

Encourage your patients to take the lead role in their care. Patients can help manage their diabetes and the associated risks by knowing their diabetes care goals and numbers, tracking and monitoring them appropriately, adhering to their care plan, and working closely with you and their full care team.¹

Consider using the following questions to help assess how well patients are working toward managing their diabetes and reducing the potential complications:

- ☐ Can you tell me the potential long-term complications of diabetes?
- ☐ How often do you have your A1C, blood pressure, and cholesterol checked? What were the latest results?
- ☐ What tests and examinations should you have done each year (eg, foot, eye, dental exams, etc.)?
- ☐ Which tests and examinations have you done this year?
- ☐ Do you need help scheduling these tests/exams?
- ☐ Have you had your glucose monitor checked to see if it's working correctly?
- ☐ How often do you check your blood sugar?
- ☐ What difficulties are you having with any aspect of your care plan?
- ☐ How else can I help you?

References: 1. American Diabetes Association. Standards of medical care in diabetes – 2014. *Diabetes Care*. 2014;37(S1):S14-S80. 2. Inzucchi SE, Bergenstal RM, Buse JB, et al. Management of hyperglycemia in type 2 diabetes: a patient-centered approach. *Diabetes Care*. 2012;35(6):1364-1379. 3. American Association of Diabetes Educators. *Guidelines for the Practice of Diabetes Education*. Chicago, IL: American Association of Diabetes Educators; 2011. 4. Rogers S. *Case Management Adherence Guidelines – Diabetes*. Little Rock, AR: Case Management Society of America; 2007.