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The diabetes Myquest consultation tool© study

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Background: The consultation between nurses and patients is an important aspect of managing diabetes, which can improve clinical outcomes. It can also be a frustrating experience due to limited time, training, and unidentified patient emotional problems. The diabetes MyQuest Consultation Tool© is a collaboration between nurses and patients to provide a meaningful guide to consultations through a patient questionnaire. The questionnaire combines clinical information, self-care statements and approved psychological scales, so that patients' needs can be more readily recognised and addressed.

Aims: The aim of this pilot study was to provide a supportive, structured, and time-efficient tool for patients and nurses to use, to optimise diabetes self-care, and to identify any mental health problems.

Methods: This pilot study was a mix of methods in randomised control trial involving patients with type 2 diabetes and with no current mental health problems. Patients were randomised to routine consultations (control) or to use the MyQuest Consultation Tool© in their diabetes appointment (intervention). Patients were given pre and post measures of diabetes knowledge (DK), consultation satisfaction (PNIF), empowerment (DES) and interviewed.

Results: 120 patients (40-90 years; m=67 years) were consented into the study. Of these, 106 patients (66 male; 40 female; average diabetes duration 9 years) completed all study visits. There were significant changes for the whole sample between pre and post study measures of DK (0.0001*), PNIF (0.0004*) and DES (0.0010*). 38% of participants scored below the clinical cut-off point on the WHO-5 Wellbeing Index indicating a need for clinical intervention. Qualitative results demonstrated a strong preference for using this tool, highlighting its empowering structure and guidance.

Conclusion: This pilot study demonstrates: High acceptability of the diabetes MyQuest Consultation Tool©; positive changes in diabetes knowledge, satisfaction and empowerment; identification of unknown mental health problems; but only slight changes in HbA1c, BMI and Cholesterol. A longer term study is now needed to test whether MyQuest could also improve clinical measures in addition to providing welcomed structure for the consultation. With T2D remaining at epidemic proportions, MyQuest may be an efficient, realistic and cost effective strategy for managing diabetes in primary care.

Biography

Gill Hood has been involved in diabetes care since qualifying as a nurse in 1984 and from 1997 began working in diabetes research. She managed the NE London Diabetes Research Network from 2007-2013 increasing patient recruitment 5 fold during this period and conducting her own research into fasting during Ramadan for people with diabetes, how older adults manage diabetes over time, and improving the patient-doctor consultation in diabetes. Gill is also an original member of the EU funded Diamap study which aimed to project diabetes research milestones for the next ten years. She is also involved with patient and public information groups encouraging users to discuss research and be more involved. She is an honorary research fellow at Queen Mary, University of London (QMUL) and continues to manage diabetes clinical research at QMUL. Gill is the Workforce Development and Patient and Public Involvement and Engagement Lead for the North West London Clinical Research Network funded by the National Institute of Health Research. In her capacity as Workforce Lead Gill runs course in Clinical Research for nurses and allied health professionals. She also runs courses for patients and the public who want to be involved with research. Gill is a member of the Foundation of European Nurses in Diabetes (FEND) and the Novo Nordisk Research Foundation for Nurses and Allied Health Professionals. Gill's diabetes research interests are in ethnic minorities and engaging hard to reach groups in research, diabetes and older adults, health professional education, and patient and public involvement.

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