• **Together 2 Goal® Updates**
  – Webinar Reminders
  – October 2017 Monthly Webinar
  – Goal Post September Newsletter Highlights

• **Patient Involvement in Together 2 Goal®**
  – Roberta Eis, R.N., B.S.N., M.B.A. and Heather Olden, M.P.H. of Henry Ford Health System

• **Q&A**
  – Use Q&A or chat feature
WEBINAR REMINDERS

• Webinar will be recorded today and available the week of September 25th
  – Together2Goal.org Website (Improve Patient Outcomes → Webinars)
  – Email distribution

• Participants are encouraged to ask questions using the “Chat” and “Q&A” functions on the right side of your screen
• **Date/Time:** Thursday, October 19, 2-3pm Eastern

• **Topic:** Patient-Reported Outcomes in Diabetes

• **Presenters:** Nirav Vakharia, M.D. and Irene Katzan, M.D., M.S. of Cleveland Clinic
GOAL POST NEWSLETTER: SEPTEMBER HIGHLIGHTS

Together 2 Goal® Diabetes Symposium

in collaboration with:

American Diabetes Association

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Upcoming Dates

- **October 19**: Monthly campaign webinar on Patient-Reported Outcomes in Diabetes
- **November 9**: National Day of Action
Share Your QI Success Story

• Submit QI stories to new *Clinical Diabetes* section “Quality Improvement & Practice Transformation“
• In collaboration with ACP & NDEP
• Stories could be included in *Clinical Diabetes* online QI repository
• Others will be published in print issues of *Clinical Diabetes*

clinical.diabetesjournals.org
Call For Abstracts

Submit your research to the American Diabetes Association’s Scientific Sessions!

Abstract submission opens October 2, 2017.

Visit scientificsessions.diabetes.org for more information.
TODAY’S SPEAKERS

Roberta Eis, R.N., B.S.N., M.B.A.
Project Manager - Primary Care
Henry Ford Medical Group

Heather Olden, M.P.H.
Epidemiologist - Department of Public Health Sciences
Henry Ford Health System
Patient Involvement in the “Together 2 Goal” Campaign
AMGA Webinar
September 21, 2017

Roberta Eis, RN, BSN, MBA, Project Manager
Henry Ford Medical Group - Primary Care

Heather A. Olden, MPH, Epidemiologist
Henry Ford Health System - Department of Public Health Sciences
Learning Objectives

• Discuss the importance of involving and engaging patients in the education and self-management process, specifically T2G
• Demonstrate how to elicit patient involvement in healthcare delivery
• Share outcomes to date related to patient participation
• Learning about Patient Engagement Research Center (PERC):
  - What is a patient advisor?
  - What they can do?
  - How to best utilize their time/talent
• Review the process of how the advisors responded to diabetes education materials as representatives of their peers
Henry Ford Health System: Background

• Founded in 1915 by auto pioneer Henry Ford, Henry Ford Health System (HFHS) is one of the nation’s leading comprehensive and integrated health systems.

• HFHS provides acute, primary, specialty and preventive care services; health insurance with a strong focus on excellence in education, research and community health.

• Comprised of six hospitals, 27 ambulatory medical centers and one of the nation's largest group practices, the Henry Ford Medical Group: > 1,200 physicians practicing in over 40 specialties; Over 4.24 million outpatient visits; 30,000+ employees, it is the fifth-largest employer in metro Detroit and among the most diverse nationally.

• Specialty Centers include: Heart & Vascular Institute, Henry Ford Cancer Institute, Maplegrove Center (chemical dependency treatment), Neuroscience Institute, Orthopedic Surgery, Transplant Institute, and the Vattikuti Urology Institute.

• In 2011, HFHS became a proud recipient of the Malcolm Baldrige National Quality Award - the nation’s highest honor for performance excellence.
HFHS Diabetes Population

Diabetes costs approximately $2,700 per individual with newly diagnosed diabetes in the first year of treatment.

Cost to HFHS Over 5 Years
15 – 30% of those with pre-diabetes will develop diabetes without intervention
$14 to $20 million

4,808 in the Diabetes Care Connections programs

Range: (35,609 x 15%) to (35,609 x 30%) = 5,341 to 10,683 new diabetics
X $2,700 = $14,421,645 to $28,843,290
Diabetes Care Connections (DCC) Programs

- Diabetes Self-Management Education/Training (DSME/T)
  - a recognized program through ADA; **that focuses on the seven domains for diabetes self-management**, as defined by the AADE: healthy eating, being active, blood glucose monitoring, taking medications, risk reduction, healthy coping, and problem solving.

- Medical Nutrition Therapy (MNT)
  - provides **individualized nutrition management** provided by a registered dietitian.

- Diabetes in Active Control (DIAC)
  - providing **intensive contact and management using medication algorithms** by the DIAC coaches (RN/CDEs) with the aim of getting patients to A1c goal in approximately six months.
DCC and Linkage to Primary Care Clinics

- DCC teams are embedded in the PC Clinics.
- Resource and process needed for the primary care clinic team to involve and engage patients with chronic conditions, especially diabetes.
  - For diabetes: need to address patients who are either newly diagnosed or who haven’t had education in the past. “First Steps Kit” was developed for that purpose – a tool with basic information for diabetes care
  - Exam Room Posters: Address A1c, BP and Prevention
- Teams created to create, identify and review materials:
  - Clinicians – accuracy of content and messaging
  - Patients – ability to comprehend information, impression of graphics, overall look/feel
Items developed....
Blood Pressure: “You Have High Blood Pressure?”

“Blood Pressure Facts”

“Diabetes and A1c Testing”

“Early Detection Saves Lives”
The material passed with our clinician team...

...but what would our patients think?
In 2013, the Patient Engaged Research Center (PERC) was funded by a 5-year, $5 million infrastructure grant from the Agency for Healthcare Research & Quality.

**Vision**
To create a sustainable foundation and model to develop and disseminate world-class patient-centered outcomes research.

**Mission**
To translate the patient voice into evidence-based care through community engagement and world-class research methods.
Who are Patient Advisors?

Any role in which those who receive care work together with health care professionals to improve care for everyone. Advisors share insights and perspectives about the experience of care and offer suggestions for change and improvement.
## Why should I involve Patient Advisors?

<table>
<thead>
<tr>
<th>Stakeholder</th>
<th>Providers/Clinicians</th>
<th>Senior Leadership</th>
<th>Research</th>
</tr>
</thead>
</table>
| Benefit           | • Improve care processes  
                    • Understand what is important to patients beyond the clinical setting       | • Hear the voice of the customer to provide a new source of feedback  
                    • Engage patients and community in a new and innovative way.               | • Create novel patient-centered approaches to research  
                    • Support for grants and publications                                     |
## What do Patient Advisors Do?

<table>
<thead>
<tr>
<th>Quality Improvement</th>
<th>Research</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Participate as active partners in decisions affecting future patients</td>
<td>• Review surveys, project materials</td>
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<tr>
<td>• Listen to presentations and provide feedback</td>
<td>• Help focus research on what matters to the patient</td>
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<td>• Bring the patient voice to the table</td>
<td>• Help with recruitment methods</td>
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<tr>
<td>• Consider innovative HFHS initiatives</td>
<td>• Make suggestions on how projects should be done</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Design</th>
<th>Virtual Participation</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Provide feedback and offer ideas to architects’ drawings and designs</td>
<td>• Participate in surveys from HF Insights Community</td>
</tr>
<tr>
<td>• Particiate in virtual and in-person walkthroughs of the new building</td>
<td>• Participate in surveys from PERC</td>
</tr>
<tr>
<td>• Suggest additional features and amenities that would improve the patient and caregiver experience</td>
<td>• Give feedback on patient education materials and other HFHS initiatives before they are seen by the public</td>
</tr>
</tbody>
</table>
Recruitment, Training and Placement Process

Recruit Advisors: Website Nominations HFHS Hold Call Line

Informal Interview

Welcome Workshop & Follow-up

Advisor Placement

Introduction to Patient Advisor Buddy

Active Advisor
Growth of the Patient Advisor Program

<table>
<thead>
<tr>
<th># of Advisors</th>
<th># of Teams</th>
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<tbody>
<tr>
<td>0</td>
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</table>

# of Advisors in Program: # of Teams

Q1  Q2  Q3  Q4  Q1  Q2  Q3  Q4  Q1  Q2  YTD
2015  2016  2017  YTD
## Tangible PFAC Results

<table>
<thead>
<tr>
<th>Patient Advisor Placement/Project</th>
<th>Plan Initiatives</th>
<th>Action Plan/Action Steps</th>
<th>% Completed</th>
</tr>
</thead>
</table>
| Head and Neck Cancer PFAC         | New Patient Resource Folder | ✓ Review resource folder components  
✓ Rewrite content and add descriptive photos and descriptions  
✓ Send to Marketing for HFHS branding  
✓ Disseminate revised folder to new patients | 75%         |
|                                   | Clinic Flow Redesign    | ✓ Council Champion (Dr. Steven Chang) presented current clinic flow for new patients  
✓ Patients provide feedback based on their experiences  
✓ Redesign implemented at HFHS ENT Clinic | 100%        |
| Care Transitions PFAC             | After Visit Summary (AVS) | ✓ Reviewed current AVS by services IP, OP, ED) and provided feedback on what they liked, wanted to modify and what they wanted to remove.  
✓ Feasibility assessment of advisor suggestions with Epic/HELIOS programming team  
✓ Changes implemented based on Patient Advisor feedback including AVS information placement, content for contact information, medication requirements and appointments  
✓ Council continues review of ED AVS | Inpatient AVS 100%  
Outpatient AVS 100%  
Emergency Department AVS 50% |
Sustain: Personalized Approach

- We know our Advisors beyond their roles as Patient Advisors and they have forged friendships.

- All Patient Advisors have monthly interactions with PERC personnel.

- Maintain a consistent feedback loop, where we’re constantly updating Advisors on the status of their feedback.

- Maintain a neutral and safe environment for Advisors to voice their opinions, feedback and suggestions. Complete transparency is key in communicating with Advisors. They understand that not all ideas and feedback can or will be implemented but they want to know their suggestions were considered and what actions were discussed.

- Outside of the placements, we regularly check in with our Advisors to see how things are going, ask if they need additional resources and ask for any feedback they have on the Program or their placement.
Challenges we’ve encountered

• Advisor drop out rate, unable to contact rate, changing contact information
• Low recruitment of men
• Continued engagement of unassigned Advisors
• Adequate number of placement opportunities for unassigned Advisors
• Aligning Advisor interests with placement needs
• Properly matching Advisors to placement opportunities
• Difficult to measure success/Return on investment
Keys to Success

• “Warm calling” and a personal touch are the keys to success in recruiting
• Frequent follow-up, keeping Advisors in the loop is imperative
  • Verbal and written updates
• Orientation Workshop should be interactive and fun!
• Have a protocol/system in place before you start recruiting (Customer Relationship Management Software is recommended)
• The caregiver perspective is just as important as the patient’s
Round 1: Diabetes Patient Education Survey (Exam Room Posters)
- Survey distributed via SurveyMonkey on June 13, 2016

- Survey closed June 27, 2016

- 128 respondents

- There was no incentive for completing the survey
Hemoglobin A1c Poster

The amount of the information

3% was: 7%

90%

Too Much  About Right  Too Little

I like the overall appearance of the poster: colors used; font size; spacing—....

The poster used words I could understand.

The information on the poster was clear and understandable.

The poster made it clear what I should do next.

The poster encouraged me to want to take the next step, Ie- get bloodwork or...

The poster would make me want to discuss the information with my doctor.

The poster would probably get my attention if it was displayed at my...

I think the poster is helpful for someone like me to better understand the...

The poster made me want to talk to my doctor.

The poster encouraged me to take the next step, Ie- get bloodwork or...

The poster made it clear what I should do next.

The information on the poster was clear and understandable.

The poster would make me want to discuss the information with my doctor.

The poster encouraged me to want to take the next step, Ie- get bloodwork or...

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The poster would probably get my attention if it was displayed at my...

I think the poster is helpful for someone like me to better understand the...
Health Screening Recommendations

I like the overall appearance of the poster: colors used; font size; spacing— not too...

I like the pictures used in the poster.

The poster used words I could understand.

The information on the poster was clear and understandable.

The poster made it clear what I should do next.

The poster encouraged me to want to take the next step, i.e., get bloodwork or test...

The poster would make me want to discuss the information with my doctor.

The poster would make me want to discuss the information with my doctor.

I think the poster is helpful for someone like me to better understand health...

The amount of the information was: Too Much, About Right, Too Little

- Too Much
- About Right
- Too Little

Strongly Agree | Agree | Disagree | Strongly Disagree
Blood Pressure Poster A

**WHAT IS BLOOD PRESSURE?**
Blood pressure is the force exerted by your blood as it flows through your blood vessels.

**WHAT CAN HIGH BLOOD PRESSURE DO?**
High blood pressure can cause damage to your heart, blood vessels, kidneys, and other organs.

**WHAT DO THE NUMBERS MEAN?**
The top number (systolic) indicates the force of your heart as it pumps blood against the walls of your blood vessels. The bottom number (diastolic) indicates the force when your heart is at rest between pumps. The higher the numbers, the greater the damage to your heart, blood vessels, and other organs.

**WHAT SHOULD MY BLOOD PRESSURE GOAL BE?**
If you are under 60 and have diabetes or kidney disease, your blood pressure goal is less than 140/90. If your numbers are higher, medicine and lifestyle changes are usually needed.

**HOW CAN I KEEP MY BLOOD PRESSURE IN CONTROL?**
- Take your medication as prescribed.
- Eat a balanced diet.
- Keep stress under control.
- Limit alcohol.
- Exercise regularly.
- Check your “After Visit Summary” for more info.

**ASK YOUR HEALTHCARE PROVIDER...**
- If the RN Blood Pressure Management Program is right for you.
- How to record and share your blood pressure readings in MyChart between your clinic visits.

---

**The amount of the information was:**
- 6% Too Much
- 93% About Right

**I like the overall appearance of the poster: colors used, font size,...**
- 6% Strongly Agree
- 93% Agree
- 2% Disagree

**I like the pictures used in the poster.**
- 6% Strongly Agree
- 93% Agree
- 2% Disagree

**The amount of information was: Too Much, About Right, Too Little.**
- 6% Too Much
- 93% About Right
- 2% Too Little

**The poster used words I could understand.**
- 6% Strongly Agree
- 93% Agree
- 2% Disagree

**The information on the poster was clear and understandable.**
- 6% Strongly Agree
- 93% Agree
- 2% Disagree

**The poster encouraged me to learn more about recording my blood...**
- 6% Strongly Agree
- 93% Agree
- 2% Disagree

**The poster would make me want to discuss the information with my...**
- 6% Strongly Agree
- 93% Agree
- 2% Disagree

**The poster would probably get my attention if it was displayed at my...**
- 6% Strongly Agree
- 93% Agree
- 2% Disagree

**I think the poster is helpful for someone like me to better...**
- 6% Strongly Agree
- 93% Agree
- 2% Disagree
Blood Pressure Poster B

The amount of the information was:

- Too Much: 14%
- About Right: 79%
- Too Little: 7%

The poster would probably get my attention if it was displayed at my doctor’s office.

- Strongly Agree: 90%
- Agree: 9%
- Disagree: 1%
- Strongly Disagree: 0%

I like the overall appearance of the poster: colors used; font size; spacing—not too busy/crowded, etc.

- Strongly Agree: 70%
- Agree: 20%
- Disagree: 10%
- Strongly Disagree: 0%

I like the pictures used in the poster.

- Strongly Agree: 75%
- Agree: 23%
- Disagree: 2%
- Strongly Disagree: 0%

The poster used words I could understand.

- Strongly Agree: 85%
- Agree: 13%
- Disagree: 2%
- Strongly Disagree: 0%

The information on the poster was clear and understandable.

- Strongly Agree: 90%
- Agree: 9%
- Disagree: 1%
- Strongly Disagree: 0%

The poster would make me want to discuss the information with my doctor.

- Strongly Agree: 90%
- Agree: 9%
- Disagree: 1%
- Strongly Disagree: 0%

The amount of the information was:

- Too Much: 14%
- About Right: 79%
- Too Little: 7%
Round 2: Diabetes Patient Education Survey: “First Steps Kit” Materials

- Survey distributed via SurveyMonkey on November 2, 2016
- Survey closed November 22, 2016
- 66 respondents
- There was no incentive for completing the survey
- Included free response questions
Type 2 Diabetes

I think the handout is helpful for someone like me to better understand diabetes and how to manage it.
I would probably look at this handout again to review the topics if needed.
The handout encourages readers to discuss the information with their doctor or diabetes educator.
The handout encourages the reader to take control of diabetes, ex: eat healthier foods, take medications,...
The handout made it clear on how to care for diabetes.
The information on the handout was clear and understandable.
The handout used words I could understand.
I like the pictures used in the handout.
I like the overall appearance of the handout; colors used; font size; spacing--not too busy/crowded, etc

Strongly Agree  Agree  Disagree  Strongly Disagree
Type 2 Diabetes Free Response Feedback

"Not enough nutrition information. Also might be too "wordy" for a patient who doesn't read."

"I am a diabetic and I did find the information to be clear and concise. It was easy to understand. Very helpful."

"The graphics look like you're trying to peak the interest of children. It needs to be very specific about medications, exercise and food people eat."
Diabetes Pills: What do I need to know?

I think the handout is helpful for someone like me to better understand...
I would probably look at this handout again to review the topics if needed.
The handout encourages readers to discuss the information with their...
The handout encourages the reader to take control of diabetes, ex: eat...
The handout made it clear on how to care for diabetes.
The information on the handout was clear and understandable.
The handout used words I could understand.
I like the pictures used in the handout.
I like the overall appearance of the handout: colors used; font size;...
Diabetes Pills: What do I need to know?

"To much verbal information, so use PICTURES & BULLET POINTS together to get YOUR POINTS ACCROSS! Use a LINK to have your clients communicate with you with questions and concerns on insulin."

"The handout is appealing and does not scare off patients. It is easy to read and understand. It might be helpful not to just explain in more detail why it is important to manage diabetes."

"I understand this was written at the 6th grade level, but the pictures look like they were drawn by a 6th grader! Too childish"
Why do I need insulin?

Advisor Feedback on Diabetes Flyer #2

I think the handout is helpful for someone like me:  
- Strongly Agree  
- Agree  
- Disagree  
- Strongly Disagree

I would probably look at this handout again to:  
- Strongly Agree  
- Agree  
- Disagree  
- Strongly Disagree

The handout encourages readers to discuss the:  
- Strongly Agree  
- Agree  
- Disagree  
- Strongly Disagree

The handout encourages the reader to take control:  
- Strongly Agree  
- Agree  
- Disagree  
- Strongly Disagree

The handout made it clear on how to care for:  
- Strongly Agree  
- Agree  
- Disagree  
- Strongly Disagree

The information on the handout was clear and:  
- Strongly Agree  
- Agree  
- Disagree  
- Strongly Disagree

The handout used words I could understand:  
- Strongly Agree  
- Agree  
- Disagree  
- Strongly Disagree

I like the pictures used in the handout:  
- Strongly Agree  
- Agree  
- Disagree  
- Strongly Disagree

I like the overall appearance of the handout:  
- Strongly Agree  
- Agree  
- Disagree  
- Strongly Disagree

Colors...  
- Strongly Agree  
- Agree  
- Disagree  
- Strongly Disagree

Pictures...  
- Strongly Agree  
- Agree  
- Disagree  
- Strongly Disagree

Words I could understand.  
- Strongly Agree  
- Agree  
- Disagree  
- Strongly Disagree

Overall appearance colors...  
- Strongly Agree  
- Agree  
- Disagree  
- Strongly Disagree
Why do I need insulin?

“The pictures looks like they are targeting children and my not be for adults.”

“My opinion of this educational handout which primarily discusses treatment for diabetes patients, is not biased, it’s colorful, yet the roadmap looks sort of confusing for the newly diagnosed patient. On the other hand, the wording seems to be clear and concise, gets straight to the point. Otherwise, I think this was complete and simple! Good job!!!!!!!”

“I understand this was written at the 6th grade level, but the pictures look like they were drawn by a 6th grader! Too childish”
Blood Glucose Meters

Using Your Meter

1. Wash your hands with soap and warm water.
2. Put the lancet or needle in the lancet device (if it is not already in the device).
3. Put the test strip in the meter.
4. Gently prick (pick) your finger using the lancet device. The fleshy skin by the side of one of your fingernails is a good spot.
5. Touch the drop of blood on your finger to the test strip. Your blood sugar number will appear on the meter in a few seconds.
6. Throw the lancet (needle) away in a sharp container or other sealed hard bottle or jar.

All meters are different. If you have any questions, call the phone number on the back of the meter. Or talk to your doctor or pharmacist.

I think the handout is helpful for someone like me to better understand diabetes and how to manage it.

I would probably look at this handout again to review the topics if needed.

The handout encourages readers to discuss the information with their doctor or diabetes educator.

The handout encourages the reader to take control of diabetes, ex: eat healthier foods, take...

The handout made it clear on how to care for diabetes.

The information on the handout was clear and understandable.

The handout used words I could understand.

I like the pictures used in the handout.

I like the overall appearance of the handout: colors used; font size; spacing--not too busy/crowded, etc.
Blood Glucose Meters

The first picture regarding the lancet did not give a clear description of the lancet.

Picture of finger makes it look like you "poke" next to the fingernail. Finger should be rotated to show the better positioning. Page does not address what to do with the value that is obtained.

Maybe a change on the font type or color on how to properly dispose of the lancet?
Low Blood Sugar

Low Blood Sugar
(Hypoglycemia)

A low blood sugar can happen quickly. If not treated right away, low blood sugar can cause a medical emergency. You can even pass out.

Common cause: Skip a meal or not eat enough food; too much insulin or diabetes pills; more active than usual.

Warning signs include:
- Shaky or dizzy
- Sweaty
- Headache
- Hungry
- Weak or tired
- Irregular heartbeat
- Lightheaded

What to do:
- Treat by eating 3 packets or 1 tablespoon of regular sugar, 4 ounces of regular fruit juice, or 5-6 ounces of regular (not diet) soda.
- Check your blood sugar right away. If it’s below 70, treat for low blood sugar. If you can’t reach, treat anyway to be safe.

I think the handout is helpful for someone like me to better understand diabetes and how to...
I would probably look at this handout again to review the topics if needed.
The handout encourages readers to discuss the information with their doctor or diabetes...
The handout encourages the reader to take control of diabetes, ex: eat healthier foods, take...
The handout made it clear on how to care for diabetes.
The information on the handout was clear and understandable.
The handout used words I could understand.
I like the pictures used in the handout.
I like the overall appearance of the handout: colors used; font size; spacing--not too...
Low Blood Sugar

LOW BLOOD SUGAR
(Hypoglycemia)

A low blood sugar can happen quickly. If not treated right away, low blood sugar can cause a medical emergency. You can even pass out.

Common causes: Skip a meal or not eat enough food; too much insulin or diabetes pills; more active than usual.

Warning signs include:

- Shakiness
- Headache
- Hunger
- Nervous

What to do?

- Check your blood sugar right away. If it's below 70, treat for low blood sugar. If you can't check, treat anyway to be safe.
- Treat by eating 3 packets or 1 tablespoon of regular sugar; 4 ounces of regular fruit juice, or 6 ounces of regular (not diet) soda.
- Check your blood sugar in 15 minutes. If it is still low (below 70), treat again. If you keep having problems and you don't know why, call your doctor or health care provider.

“The page looks crowded with information closely bunched together. There needs to be more spacing and possibly more up to date pictures / artistry to catch the readers attention.”

“This had good information that would be helpful to someone like me. I know what to do about low blood sugar and what to do. Very easy to understand.”

“Good information regarding hypoglycemia, but what should you do if no quick sugar is available? This should be addressed by suggesting keeping something available (glucose tablet, candy) at all times (keep in car, desk, purse, pocket, etc.).”
Healthy Eating Plate

I think the handout is helpful for someone like me to better understand diabetes and how to manage it. I would probably look at this handout again to review the topics if needed.

The handout encourages readers to discuss the information with their doctor or diabetes educator. The handout encourages the reader to take control of diabetes, ex: eat healthier foods, take medications, etc.

The handout made it clear on how to care for diabetes.

The information on the handout was clear and understandable.

The handout used words I could understand.

I like the pictures used in the handout.

I like the overall appearance of the handout: colors used; font size; spacing--not too busy/crowded, etc.
I do not see a reference of how to care for diabetes in the hand out. The hand out tells the reader how to eat healthy but does not specify that this is specifically important in caring for diabetes.

It is unclear to me if one should limit coffee and water or incorporate both or either into a healthy diet based on the illustrations.

This handout does a good job in helping someone understand the diet that would help keep their diabetes under control, but it doesn't say this. The font in the circular ring, e.g. "50% vegetables" should be shrunk in size. The "a" in "tea" should be redrawn.
Takeaways: Patient Education Materials Review

• Consider incentivizing participation for completing the survey
• Always report back to the participants the updates and progress made based on their feedback.
• Include free-responses to collect qualitative feedback
• Transparency is key to engagement! Share with the participants:
  • Where materials will be used
  • Who will be utilizing materials
  • What you plan to do with the feedback you receive
• Be prepared for CANDID feedback!
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Questions?