Title of Intervention: Evaluation of a patient education intervention

Intervention Strategies: Group Education

Purpose of the Intervention: To provide employees with information to enhance diabetes self-care; to educate employees on the value and importance of optimal diabetes management

Population: Employees with diabetes

Setting: Downtown Chicago; worksite-based

Partners: None mentioned

Intervention Description:
- Group Education: Five seminars conducted at the worksite included the following topics: meal planning/nutrition, exercise, medications, preventing complications, and stress management. Each module was presented by a trained, certified diabetes health educator. The modules were offered at monthly intervals and the presentations lasted approximately one hour, during lunchtime.

Theory: Not mentioned

Resources Required:
- Staff/Volunteers: Certified diabetes health educator
- Training: Not mentioned
- Technology: Not mentioned
- Space: Room to conduct group education sessions
- Budget: Not mentioned
- Intervention: Health educator, incentives (glucose monitors, box lunches, lab tests)
- Evaluation: Questionnaires, medical history form, blood specimens

Evaluation:
- Design: Pre- and post-test
- Methods and Measures:
  - Questionnaires assessed knowledge and recent symptoms of diabetes.
  - A brief medical history form recorded treatment of diabetes and history of complications.
  - A blood specimen was drawn for lipid levels and repeat blood testing was performed 3 months after baseline lab tests were performed.

Outcomes:
- Short Term Impact: No change in knowledge was mentioned.
- Long Term Impact: Significant improvement in diabetes control was achieved through decreases in measured mean fasting blood glucose, mean glycohemoglobin and mean hemoglobin from baseline to 3 months.

Maintenance: Not mentioned

Lessons Learned: A worksite diabetes educational program can have measurable results in as few as three months. This can result in fewer overall days absent, reduced short-term disability days and lower costs relating to diabetes and complications of diabetes.

Citation(s):