Title of Intervention: Reflective tutoring for staff to provide better diabetes patient-centered care

Intervention Strategies: Provider Education

Purpose of the Intervention: To improve patient-centered counseling experiences

Population: General practitioners and diabetes nurses working in primary health care

Setting: Primary health care centers in two large towns in mid-Sweden; worksite-based

Partners: None mentioned

Intervention Description:
- Provider Education: Intervention tutors visited the health care providers four to five times. On each occasion, a diabetes patient appointment was video recorded. The video was reviewed by the provider and tutor in a stimulated recall session. The video was stopped each time the provider wanted to discuss an aspect. The supervisor would follow up with questions that stimulated reflection. The aim was to stimulate the professional’s reflection on their understanding and the professional role in the encounter.

Theory: Not mentioned

Resources Required:
- Staff/Volunteers: Health care providers, intervention tutors
- Training: Not mentioned
- Technology: Video recorders, players, tapes
- Space: Room for counseling
- Budget: Not mentioned
- Intervention: Not mentioned
- Evaluation: Reflection questions

Evaluation:
- Design: Cohort
- Methods and Measures
  - Video tape analyses were conducted to examine changes in physician counseling techniques and the education model.
  - Interviews were conducted to assess patient satisfaction.

Outcomes:
- Short Term Impact: Patients reported general satisfaction with the provider consultations. The overall patient-centered behavior was not significantly changed during the intervention, but facilitations and reassurance changed in a positive direction. Patients' new understandings only occurred in reflective encounters, but these were more frequent by the end of the intervention.
- Long Term Impact: Not measured

Maintenance: Not mentioned

Lessons Learned: A more economical way to perform education interventions would be to work with groups of professionals, rather than one on one.

Citation(s):