

Overview and sheets to the Guided Self-Determination course

New beginning in life with diabetes

Translated from Danish

The course overview is mailed or handed out to the participants prior to conversation 1

Process and sheets for the **NEWBEGINNING in life with diabetes**

Collaborating about life with diabetes – conversation 1	Mailed	Handed out	Discussed
Invitation to collaborate	/	/	/
Two ways to utilise the long-term test, HbA1c	/	/	/
Important events and periods in your life	/	/	/
Current challenges/problems in living with diabetes	/	/	/
To be handed out or mailed prior to conversation 1 and discussed during conversation 1			
The collaboration process about life with diabetes – conversation 2	Mailed	Handed out	Discussed
Unfinished sentences – values, experiences and needs	/	/	/
Your plans for changing your lifestyle	/	/	/
To be handed out during conversation 1 and discussed during conversation 2			
Your life with diabetes – conversation 3	Mailed	Hand out	Discussed
Picture, metaphor or automatic thoughts about diabetes	/	/	/
Space for diabetes in your life	/	/	/
To be handed out during conversation 2 and discussed during conversation 3			
The Agreement for making changes – conversation 4	Mailed	Hand out	Discussed
Agreed description of main challenge/problem in your life with diabetes /	/	/	/
For and against	/	/	/
To be handed out during conversation 3 and discussed during conversation 4			
Work to make changes – Conversation 5	Mailed	Hand out	Discussed
The current ways of solving the challenge/problem (4 pages)	/	/	/
Dynamic Problem solving	/	/	/
To be handed out during conversation 4 and discussed during conversation 5. To be repeated if needed during following conversations			
<u>Your</u> goals for blood glucose and Hba1c – conversation 6	Mailed	Hand out	Discussed
Blood glucoses testing and <u>your</u> reasons to monitor levels	/	/	/
Your ideal and actual blood glucose levels	/	/	/
Advantages and disadvantages in different blood glucose levels	/	/	/
<u>Your</u> plan for controlling blood glucose in short and long-term	/	/	/
To be handed out during conversation 5 and discussed during conversation 6			
New strategies and long-term plan – conversation 7	Mailed	Hand out	Discussed
Evaluation of newly applied strategies	/	/	/
Self-determined goal for HbA1c level documented in patient records	/	/	/
Self-determined work for changes documented in patient records	/	/	/
Agreement during conversation 6 and discussed during conversation 7			
Hand-over conversation	Mailed	Hand out	Discussed
Personal status and long-term plans are shared with selected team member	/	/	/
To be handed out and discussed during conversation 7 between patient, GSD supporter and selected team member			

NEWBEGINNING course for adults with type 1 diabetes
Conversation 1

The collaboration process about life with diabetes

- Invitation to collaborate
- Two ways to use the long-term test (HbA1c)
- Important events and periods in your life
- What is currently most challenging or difficult by living with diabetes?

DATE for conversation: _____

Diabetes Educator phone no: _____

e-mail: _____

Invitation to collaborate

One- to- One setting

What should be the focus of our collaboration?

- Something, that currently is challenging or difficult for you in the everyday of living with diabetes

What is your role and my role?

- Both yours and my knowledge and experience are necessary
- Both of us must be active and utilise our time in the best possible way on aspects we find important
- Part of the time we will be working separately- and part of the time we will work together

How should we work together?

- It is OK that you and I perceive your situation differently
- Disagreeing is OK
- Having and showing emotions are OK
- It is necessary that we know each other's opinions

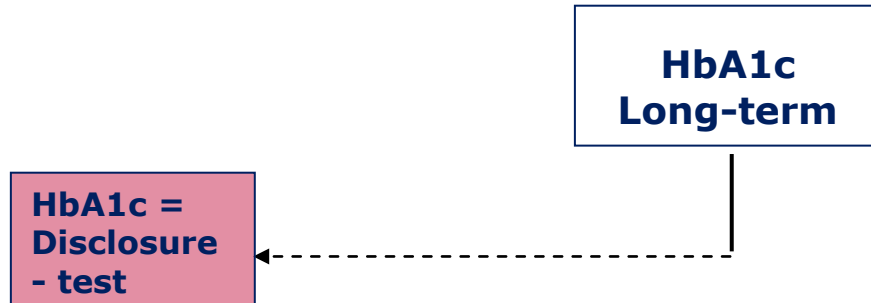
We will use reflection sheets – but what can they be used for?

- You can use them for reflection and for gaining insight into your situation – in peace and quiet
- We can use them for gaining a general understanding of what is important in your situation
- They can make it easier to talk about the more difficult aspects of diabetes
- They can help you making decisions tailored to your needs and therefore possible to maintain
- They help us to stay on course.

Best wishes the diabetes team

Two ways to use the HbA1c test

To use the HbA1c test in a retrospective way as a disclosure test



BGL – BGL – BGL!

I might passively accept the goal of the long-term test that the health professionals recommend

I allow the long-term test to be used in a retrospective way to discover, explore or disclose about how my blood glucose levels have been

Depending on the outcome I can feel that I am the good and accommodating patient or I feel that I have been exposed or unsuccessful. At the same time I can experience that health professionals meet me with a lifted finger or are disappointed in me.

To utilise the HbA1c test in a prospective way as a target test



I decide my own goal for the long-term test, which I both believe will be realistic and beneficial.

I use the goal as a future point that I can aim at and achieve in my own pace. I am curious to find out how my blood glucose levels are, because I want to know if I am heading in the right direction

Important events and periods in your life with diabetes

State the year you were diagnosed with diabetes

Indicate the start and endpoints of longer **periods** in which your diabetes was **well controlled**

Your diabetes has been **well controlled** (write **W** or draw a thick line **on** the line)



Your blood glucose levels have been **high** (write **H** on the line or draw a line **over** the line)



You have been bothered by **low** blood glucose levels (write **L** on the line or draw a wavy line **under** the line)



You have been bothered by **fluctuating** blood glucose levels (draw **F** on the line or draw a wavy line **on** the line)

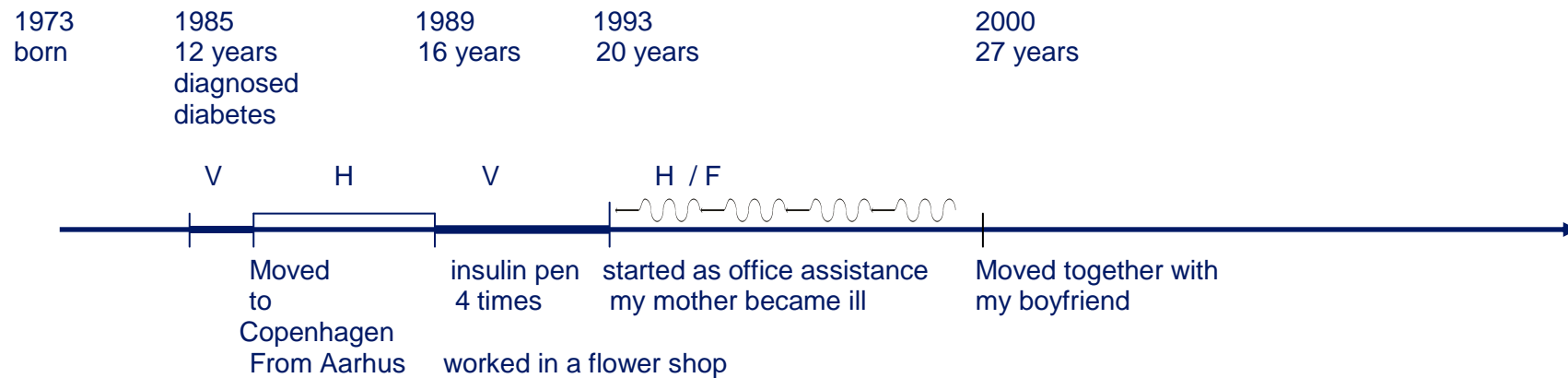


State what in your opinion have impacted both positively and negatively on the blood glucose control:

For example emotions and reactions; events; experiences at home, at work, in school or during leisure time; other circumstances for example medication (see example on next page)

Example from a patient with type 1 diabetes

"Important events and periods in your life with diabetes"



Name and code:

What do you currently find most challenging or difficult in living with diabetes?

Write a few key words:

NEWBEGINNING course**The Collaboration Process about life with diabetes
Conversation 2**

- **Unfinished sentences - about *values, experiences and needs***
- **Your plans for making changes in your lifestyle**

DATE for conversation: _____**Diabetes Educator's Phone:** _____**e-mail:** _____

Unfinished sentences - *about values, experiences and needs*

Those, who know how I live, think that I...

In regards to my diabetes I am best at...

The worst thing about having diabetes is...

I am worst at...

My diabetes has prevented me from

Diabetes will not prevent me from...

In a year's time I will...

I should not blame my diabetes for...

When I am due at the outpatient clinic, I think of...

I would like to learn more about....

I measure my blood glucoses because ...

Things that can give problems at home...

I think that my colleagues/friends...

Things I try to change about myself....

A habit I find it difficult to change is....

I find it difficult to resist pressure from...

I get good support from....

I get no support from...

What I most of all wish for is ...

My diabetes has taught me...

The happiest day in my life was when...

The saddest day in my life was when ...

What I most of all wish for is...

When I am old, I would like to look back on having...

Plans to change lifestyle

Many of the rules and recommendations to people with diabetes can be difficult to fit into everyday life.

Fill in with an X in the **left** column beside all the statements that you think applies to your everyday.

Fill in with an X in the **right** columns, if there is something you would like to change or have no plans to change.

My everyday life is characterised by the fact that I: (fill in with an X)		I would like to change: (fill in with an X)			I have no plans to make changes (fill in with an X)
		Within the first month	Within the first 6 months	After the first 6 months	
	I do not eat the meals I need according to my treatment				
	I do not adjust my insulin when what I drink and eat contains more carbohydrates than normally				
	I eat too much when my blood glucose is low				
	I do not exercise enough				
	I sometimes do not take the amount of insulin I need				
	I do not adjust my intake of insulin or food enough in connection with exercise				
	I am overweight				
	I smoke				
	I have problems with alcohol				
	I discover low blood glucoses too late				
	I do not check my blood or urine as recommended				
	I am often exposed to harmful stress				
	I sometimes do not take other prescribed medication				

* Fill in an X if following statement applies to you:

- I do not use any other prescribed medication but insulin

NEWBEGINNING course for adults with type 1
diabetes Conversation 3

Your life with diabetes

- Pictures, metaphors or automatic thoughts about diabetes
- Space for diabetes in your life

DATE for conversation: _____

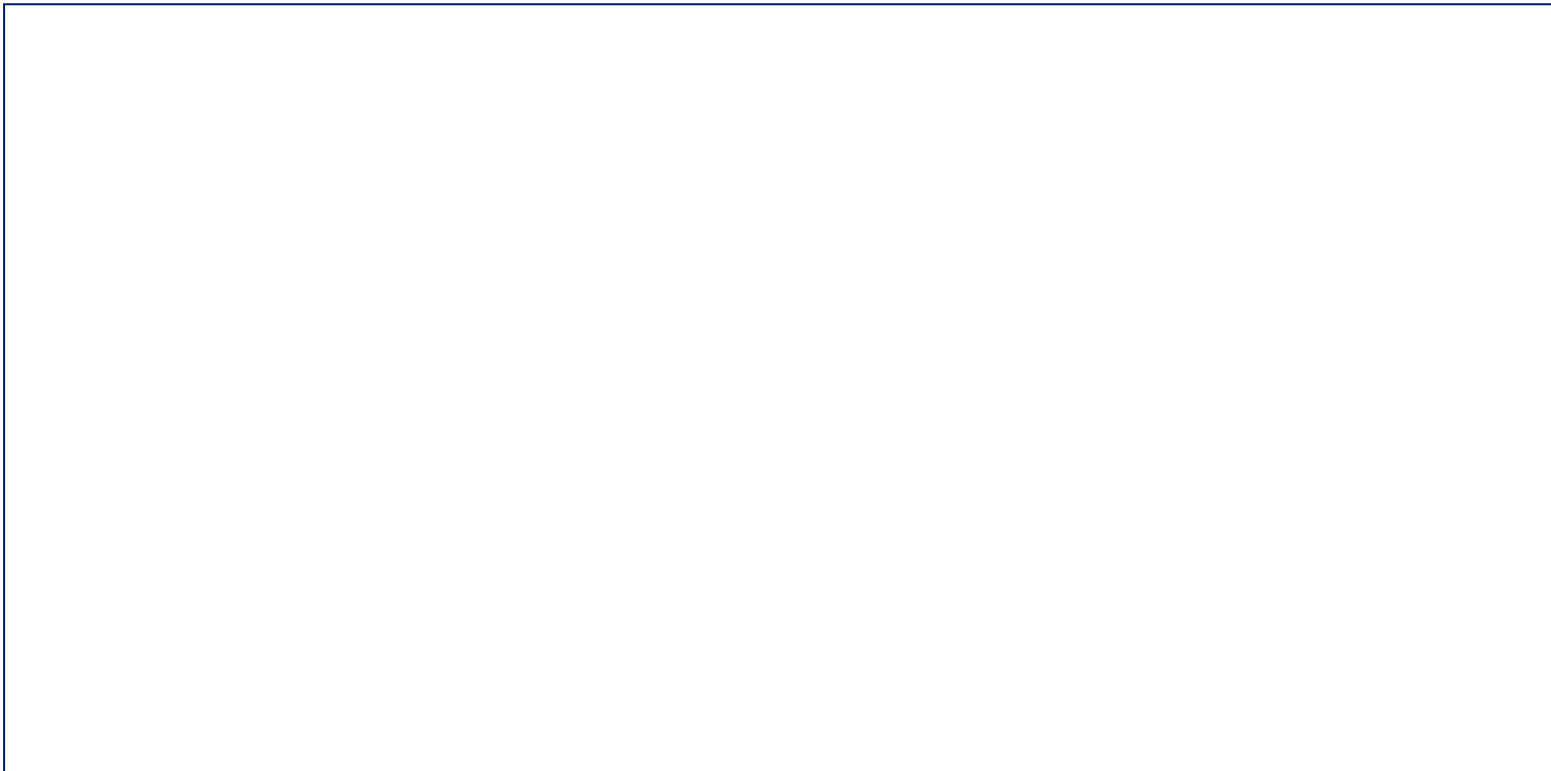
Diabetes Educator's phone no: _____

e-mail: _____

Name and code:

A picture, metaphor or a fixed phrase you use to describe how it is for you to live with diabetes.

(Write and/or draw)

A large, empty rectangular box with a thin black border, intended for the participant to write or draw their response to the prompt above.

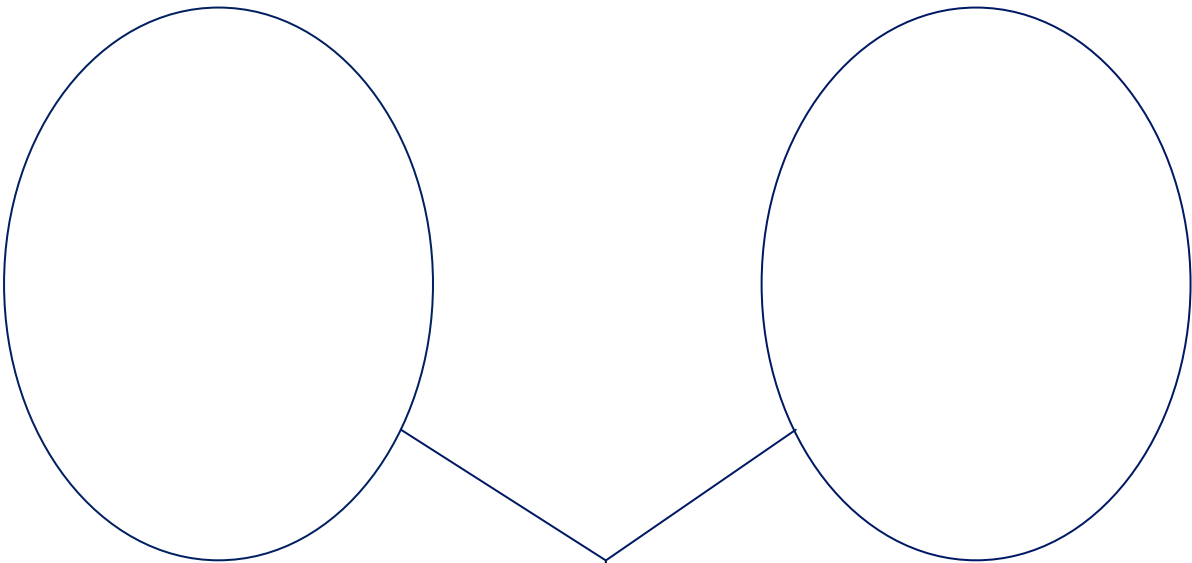
Space for your diabetes in your life

Diabetes has taken up
this much space in my life until now

Diabetes will take up so much
space in the future

Mark the space diabetes currently takes

Mark the space diabetes will take in the future



What is the difference?

A large, empty rectangular box with a thin black border, intended for the user to write their response to the question 'What is the difference?'. The box is centered horizontally below the question.

Name and code:

The Diabetes Educator’s draft for Choosing and naming of the challenge/problem in your life with diabetes

Our independent lists of what we perceive as being challenging /difficult for you (it is OK that they are different):

Your list: You fill it out at home

Diabetes Educator’s list: to be filled out immediately after 3rd conversation and to written during 4th conversation.

Wish to change: to be filled out together during the 4th conversation

Together we describe a challenge or a problem, we think you could benefit by expanding your insight to and capacity to manage.

The challenge or problem must be expressed in a way you like and we both find covers the

NEWBEGINNING course for adults living with type 1 diabetes
Conversation 4

Conversation about agreement to make changes

- Agreed description of main challenge or problem in your life with diabetes
- “For and against”

DATE of conversation: _____

Diabetes Educator’s phone: _____

e-mail: _____

Name and code:

Choosing and naming of a challenge/problem in your life with diabetes

Our independent lists of what we perceive as being challenging/difficult for you (it is OK that they are different):

Your list: You fill it out at home

Diabetes Educator's list: to be written during conversation 4

Wish to change: to be filled out together during the 4th conversation

Together we describe a challenge or a problem, we think you could benefit by expanding your insight to and capacity to manage.

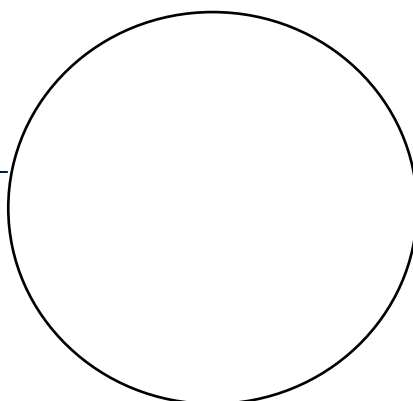
The challenge or problem must be expressed in a way you like and we both find covers the issue.

Name and code:

“For and against”

Very good

Good



Less good

Bad

NEWBEGINNING course for adults with type 1 diabetes
Conversation 5

Work to make changes

- **Ways the described challenge/problem has been solved until now (4 pages)**
- **Dynamic problem solving (1 page)**

DATE for conversation: _____

Diabetes Educator's phone no.: _____

e-mail: _____

Name and code:

The challenge/problem that causes difficulties

What is difficult is:



Your observations

For how long have you experienced it?

How often do you experience it?

Has it increased or decreased over time?

When do you notice it the most?

When do you notice it the least?



Your thoughts and feelings

What do you think the challenge/problem is related to?

What makes it worse?

What makes it better?

What does it stop you from doing?

What do you achieve by having it?

How much does it affect you?

Your Goals and Intentions

What is important for you? – What are you aiming to achieve?

What can you/others gain
by solving the challenge/problem?

In the short term?

In the long term?

What can you/others loose by solving the
challenge/problem?

In the short term?

In the long-term?

Do you want to solve the challenge/problem completely or partly?

If partly----- which parts?

Your Actions

Which partially successful attempts have you made until now to solve the challenge/problem?

When?

How often?

What have you done til now without much success?

Who did you get help from?

—

Who have you lacked help from?

Who did you ask for help?

-

Who would you have liked to ask for help?

Name and code:

Your Observations

Dynamic Problem-Solving

Your goals and intentions

Expanded and prospective problem-solving

Problem-solving to date

What is difficult is:

Your thoughts and feelings

Your actions

NEWBEGINNING course for adults with type 1 diabetes
Conversation 6

Status: Your goals in relation to blood glucose and HbA1c

- Blood glucose tests and your reasons for doing them
- Your ideal and actual daily blood glucoses
- Advances and disadvantages in blood glucose control
- Your plan for blood glucose control in the short- and long-term

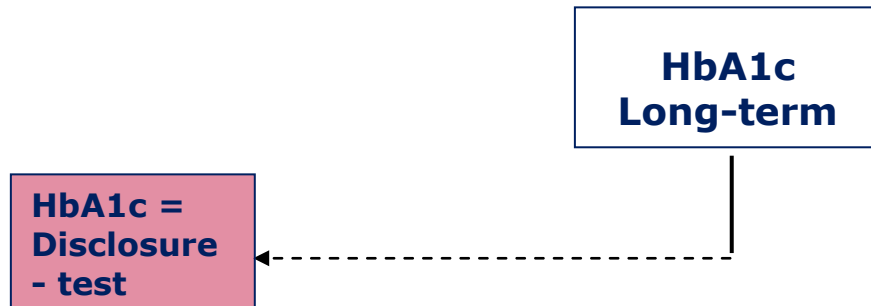
DATE for conversation: _____

Diabetes Educator's phone no: _____

e-mail: _____

Two ways to use the HbA1c test

To use the HbA1c test in a retrospective way as a disclosure test



BGL – BGL – BGL!

I might passively accept the goal of the long-term test that the health professionals recommend

I allow the long-term test to be used in a retrospective way to discover, explore or disclose about how my blood glucose levels have been

Depending on the outcome I can feel that I am the good and accommodating patient or I feel that I have been exposed or unsuccessful. At the same time I can experience that health professionals meet me with a lifted finger or are disappointed in me.

To utilise the HbA1c test in a prospective way as a target test



I decide my own goal for the long-term test, which I both believe will be realistic and beneficial. I use the goal as a future point that I can aim at and achieve in my own pace.

I am curious to find out how my blood glucose levels are, because I want to know if I am heading in the right direction

Name and code:

Blood glucose control and your reasons for doing blood glucose testing:

Date	Breakfast		Lunch		Afternoon snack		Dinner		Bed-time	Middle of the night	Average
	before	1½ hour after	before	1½ hour after	before	1½ hour after	before	1½ hour after			

Add one or more letter from below list that matches to your reason(s) for doing each blood glucose monitoring.

- A** – Agreement
 - H** – detecting High blood glucose levels
 - Y** – for Your sake (the diabetes team)
 - L** – preventing or detecting Low blood glucose level
 - M** – for My sake
 - C** – Curiosity
 - H** – Habit forming
- (If needed add a letter that suits you)

Name and code:

Your ideal and actual goals for daily blood glucose control

Your ideal goals for daily blood glucoses

Date	Breakfast		Lunch		Afternoon snack		Dinner		At bed time	In the middle of the night	Average
	before	1½ hours after	before	1½ hours after	before	1½ hours after	before	1½ hours after			
Highest											
Lowest											
Average of ideal BGL:											

Blood glucoses as you know them from experience of a typical day

Date	Morgenmad		Lunch		Afternoon snack		Dinner		At bedtime	In the middle of the night	Average
	before	1½ hours after	before	1½ hours after	before	1½ hours after	before	1½ hours after			
Highest											
Lowest											
Average of the actual BGL:											

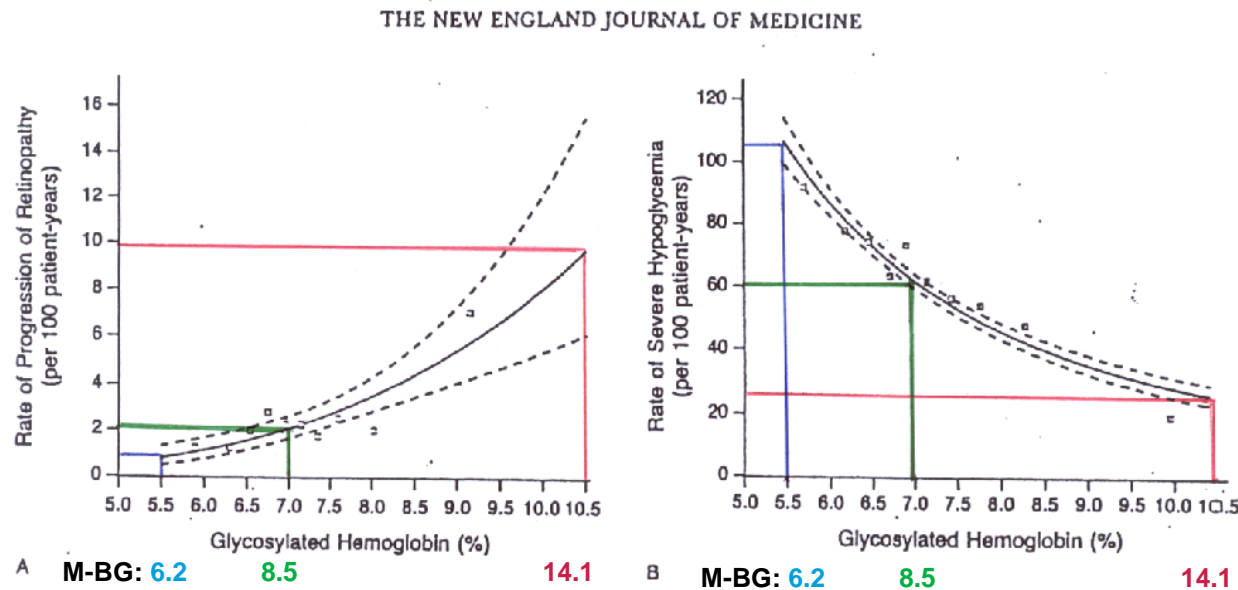
Mark your

ideal & actual middle glucose	5	6	7	8	9	10	11	12	13	14	15	16	17	18	mmol/l
HbA1c	29	36	42	49	56	63	70	77	84	91	97	104	111	118	mmol/mol
"Old" HbA1c	5.5	5.4	6	6.7	7.3	7.9	8.5	9.2	9.8	10.4	11.1	11.7	12.3	12.9	%

Advantages and disadvantages of regulating high and low blood sugar

What do we actually know about type 1 diabetes?

The New England Journal of Medicine



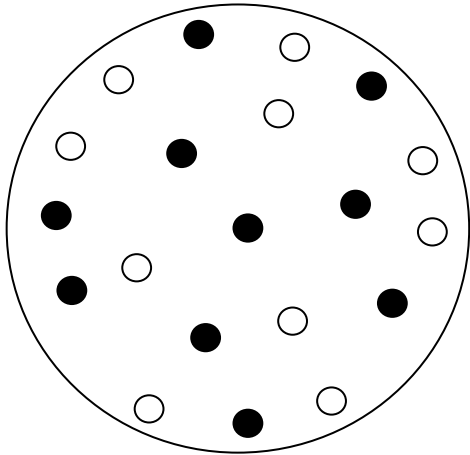
The higher the HbA1c, the greater is the known risk of developing lasting changes, for instance in the eyes. The lower the HbA1c, the greater the risk of serious situations with low blood sugar (for instance situations where you cannot do without the help of others)

Curves show how often this happens during 100 patient years:

i.e. for 100 persons during a 1-year period
or for 20 persons during a 5-year period
or for one person during a 100-year period

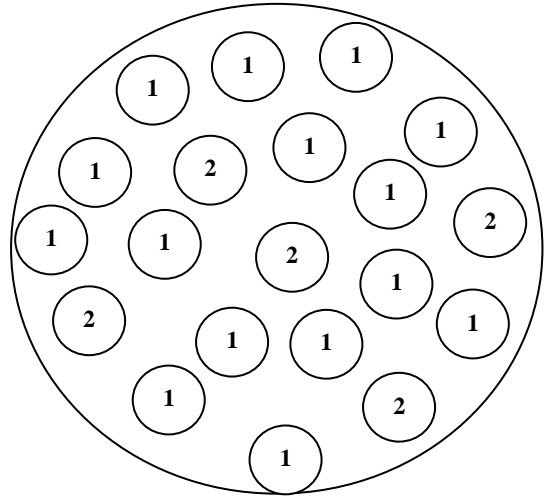
Instances of new registered lasting changes in eyes* (**type 1 diabetes**)

Serious instances of low blood sugar** (**type 1 diabetes**)



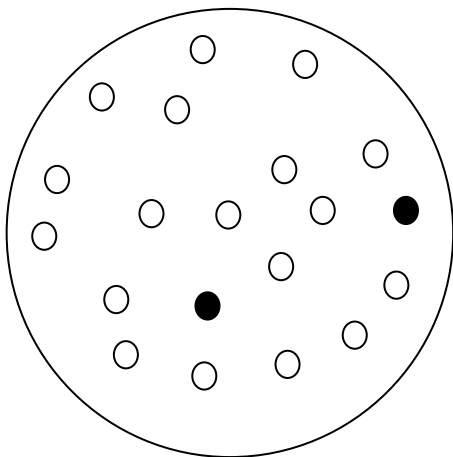
HbA1c 10.5 %

M-Bg 14.1 mmol/l



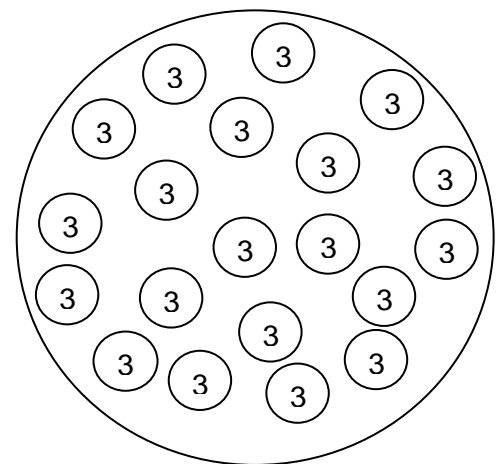
10 instances in 5 years in a group of 20

25 instances in 5 years for a group of 20



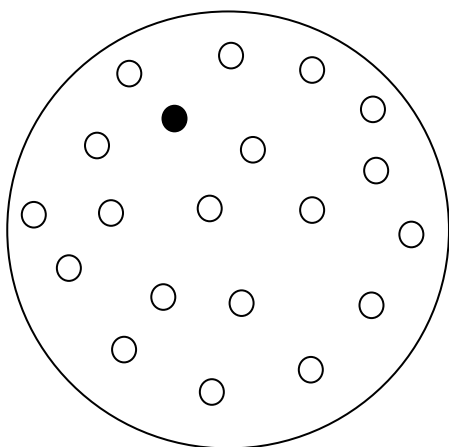
HbA1c 7.0 %

M-Bg 8.5 mmol/l



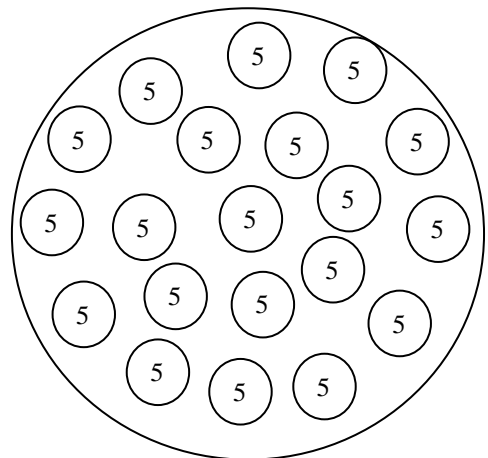
2 instances in 5 years for a group of 20

60 instances in 5 years for a group of 20



HbA1c 5.5 %

M-Bg 6.2 mmol/l



1 instance in 5 years for a group of 20

100 instances in 5 years for a group of 20

* A new deterioration which it has been possible to register in one eye for ½ year, measured as at least 3 steps on a so-called ETDRS-scale consisting of 25 steps

** Insulin events which cannot be managed without the help of others

Name and code:

Your plan for controlling blood glucose levels in short - and long-term perspectives

M-BGLs prior to the process:
mmol/l

M-BG, as you want it to be
At following points of time



M-BGL		M-BGL		M-BGL		M-BGL	
Goal	Result	Goal	Result	Goal	Result	Mål	Resultat
_____	_____	_____	_____	_____	_____	_____	_____
Date		Date		Date		Date	

In which situations do you especially want to avoid low blood sugar?

NEWBEGINNING course for adults with type 1 diabetes
Conversation 7

- New strategies and long-term plan

DATE for conversation: _____

Diabetes Educator Phone no: _____

e-mail: _____

Name and code:

New strategies and long-term plan

Express in one sentence what you have achieved at this point of time?

From the sheet, "**Your plans for changes in life style**" conversation **2**, which changes are you still working on?

Within the first month

Within the first six months

Which changes do you still not want to make?

From the sheet, "Dynamic Problem-solving", which problems/challenges do you still work on?

Which goal for HbA1c do you want to aim at, because you think it is beneficial and possible for you to achieve?

NEWBEGINNING course for adults with type 1 diabetes
Multi-disciplinary
conversation

- Han-over after consultation being integrated into the course and the long-term plan

DATE for conversation: _____

The Diabetes Educator's phone no: _____

e-mail: _____

Name and code:

Hand-over conversation between patient, NEWBEGINNING-supporter and selected team member

Name of NEWBEGINNING-supporter: _____

Name of selected team member: _____

Personal status and long-term plans:

Write in one sentence what you have achieved so far during the course?

Main points you want to pass on:

Problems/challenges you continue to work on:

How can the NEWBEGINNING-supporter and selected team member support you?

Comments on your own goals for HbA1c:

Comments on your own goals for making changes:
