

The 'perioperative passport': empowering patients with diabetes along their surgical journey

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Aims

The multistep perioperative process presents particular challenges to patients with diabetes. We aimed to determine whether a handheld 'perioperative passport' could help empower patients with diabetes and overcome some of the communication issues commonly identified in inpatient extracts.

Methodology:

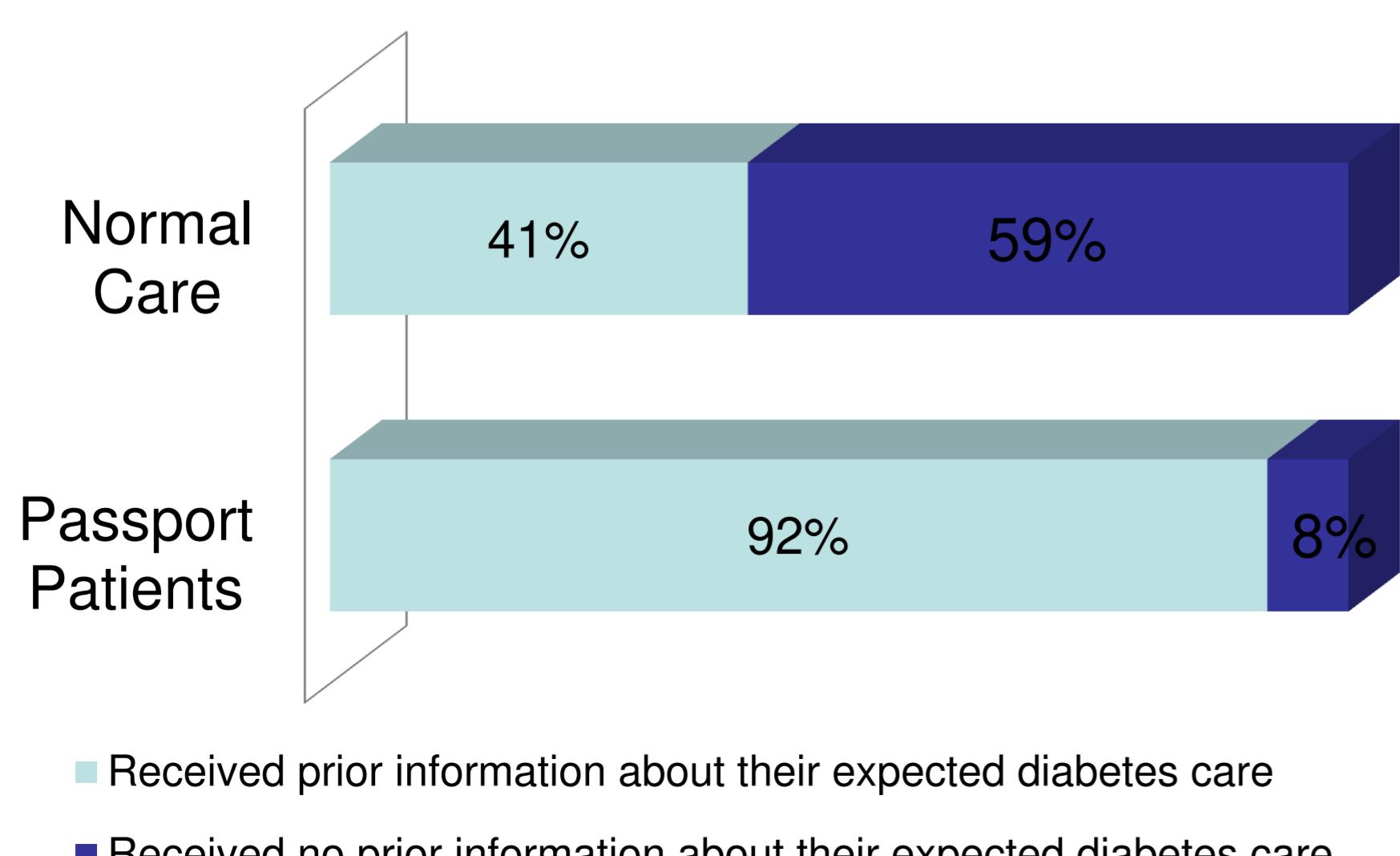
Forty people with diabetes (mean age 68) undergoing elective surgery requiring at least an overnight stay

were identified via a customised IT system and given the perioperative passport prior to their hospital admission. A 26 item questionnaire was completed post-surgery by these patients and by 30 individuals (mean age 69) with diabetes (control group) following the usual surgical pathway. Additionally the former group had a structured interview on their experience of the passport.

Results

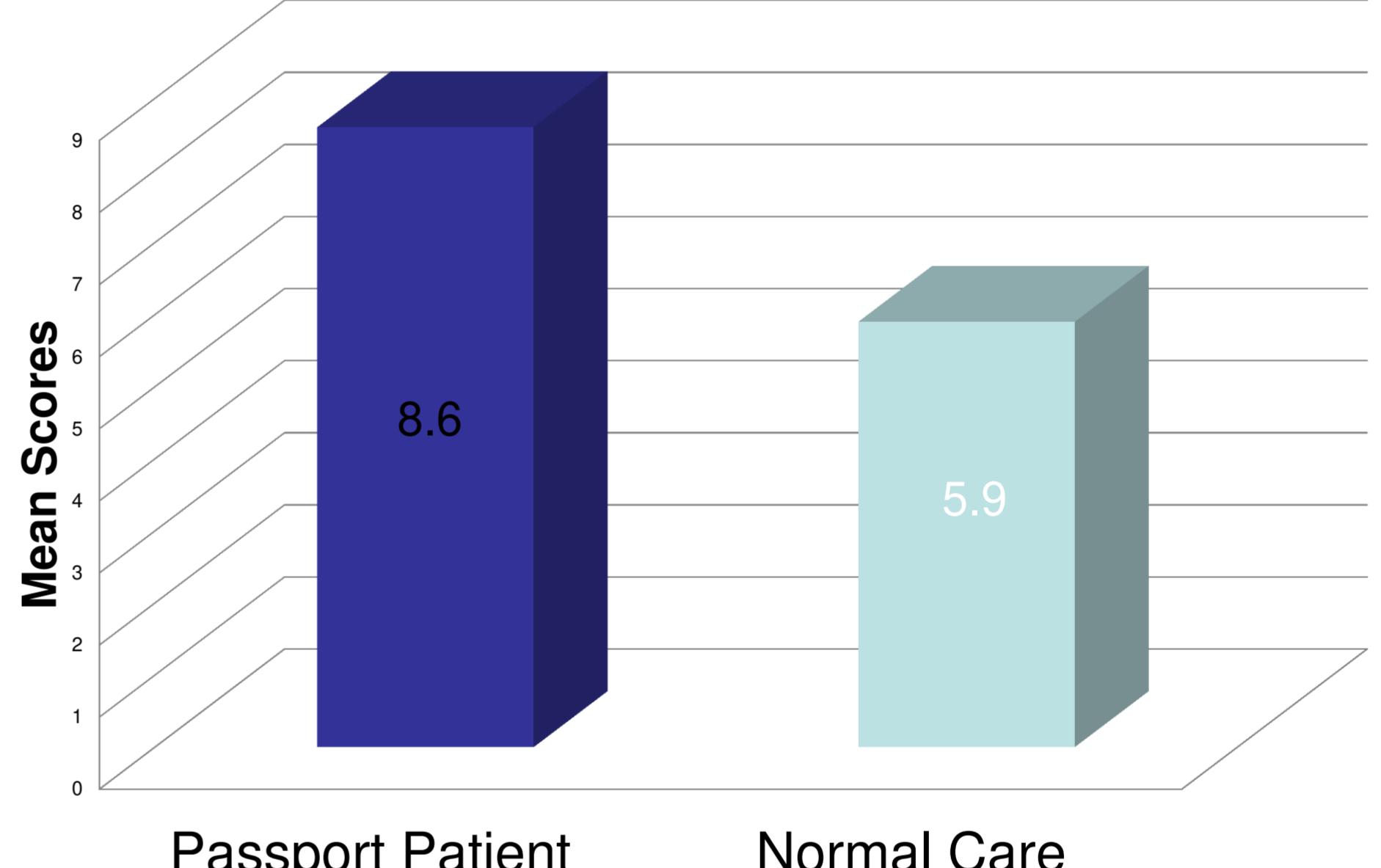
- More of the passport group reported receiving prior information about their expected diabetes care [92% vs 41% in the control ($p<0.001$)]. Figure 1.
- The passport group found the information significantly more helpful ($p<0.001$), including the advice on medication adjustment ($p=0.039$)

Fig 1. Before coming into hospital did you receive any information on the diabetes care you should expect during your hospital stay?



- The passport group felt more involved in planning their diabetes care ($p < 0.001$). Figure 2
- More of the passport group were aware of the existence of the diabetes inpatient team ($p = 0.01$)
- The passport group reported being better prepared to manage their diabetes on discharge ($p < 0.001$).
- Mean length of stay was also shorter in the passport patient group (4.5 vs 6 days).

Fig 2. How involved did you feel in the planning of your diabetes care for your admission?



The Structured Interview

Content analysis of the interview schedules indicated the passport was well liked, easy to complete and considered innovative. Users reported they felt more prepared for surgery, and that the passport answered all their questions.

Conclusions

Our data indicates that the perioperative passport is effective in both informing and involving people about their diabetes care throughout the perioperative period. Future studies will determine whether the passport can also have an effect on clinical outcomes.

References

Diabetes UK, 2007, Collation of inpatient experiences
NHS, 2011, Management of adults with diabetes undergoing surgery and elective procedures: Improving standards