# Improving the delivery of care for patients with type 2 diabetes

**Clinician Follow-up Questionnaire 2009**

1. **What is your role within this General Practice?** (Please circle)
   - Practice nurse
   - Nurse Specialist (Specialty:__________________) Nurse Practitioner
   - Nurse Prescriber
   - District Nurse
   - GP (Salaried)
   - GP (Partner)
   - Other (please specify)........................................

2. **How long have you worked at this general practice?** ....... Years ....... Months

**Questions 3 & 4 ask about you providing advice about weight management, both in general and over the past 12 months, to patients with type 2 diabetes whose BMI is above a target of 30 kg/m² even following previous management.**

3. **Is giving advice about weight management to patients with type 2 diabetes part of your clinical role?**
   - Yes GO TO Q4
   - No GO TO Q5

4. **Over the past 12 months, given 10 patients with diabetes whose BMI was above target, for how many did you provide advice about weight management?**
   (Please circle one number)
   - 0
   - 1
   - 2
   - 3
   - 4
   - 5
   - 6
   - 7
   - 8
   - 9
   - 10

**Questions 5 & 6 ask about you prescribing additional antihypertensive drugs, both in general and over the past 12 months, for patients with type 2 diabetes whose blood pressure (BP) is 5mm Hg above a target of 140 mm Hg Systolic BP or 80 mm Hg Diastolic BP, even following previous management.**

5. **Is deciding to prescribe antihypertensive drugs to patients with type 2 diabetes part of your clinical role?**
   - Yes GO TO Q6
   - No GO TO Q7

6. **Over the past 12 months, given 10 patients with diabetes whose BP was 5 mm Hg above target, for how many did you prescribe an additional antihypertensive drug?**
   (Please circle one number)
   - 0
   - 1
   - 2
   - 3
   - 4
   - 5
   - 6
   - 7
   - 8
   - 9
   - 10
Questions 7 & 8 ask about you examining the circulation and sensation in the feet, both in general and over the past 12 months, of patients with type 2 diabetes registered with your practice.

7. Is examining the circulation and sensation in the feet of patients with type 2 diabetes part of your clinical role?  
   ☐ Yes  GO TO Q8  ☐ No  GO TO Q9

8. Over the past 12 months, given 10 patients with diabetes, for how many did you examine the circulation and sensation in their feet?  
   (Please circle one number)
   0  1  2  3  4  5  6  7  8  9  10

Questions 9 & 10 ask about you providing advice about self-management, both in general and over the past 12 months, to patients with type 2 diabetes registered with your practice.

9. Is providing advice about self-management to patients with diabetes part of your clinical role?  
   ☐ Yes  GO TO Q10  ☐ No  GO TO Q11

10. Over the past 12 months, given 10 patients with diabetes, for how many of these patients did you provide advice about their self-management?  
    (Please circle one number)
    0  1  2  3  4  5  6  7  8  9  10

Questions 11 & 12 ask, both in general and over the past 12 months, about you prescribing an additional therapy for the management of HbA1c in patients with type 2 diabetes whose HbA1c is higher than 8.0% despite maximum dosage of two oral hypoglycaemic drugs.

11. Is deciding to prescribe additional therapy for patients with type 2 diabetes part of your clinical role?  
    ☐ Yes  GO TO Q12  ☐ No  GO TO Q13

12. Over the past 12 months, given 10 patients with diabetes whose HbA1c is above target, for how many did you prescribe an additional therapy?  
    (Please circle one number)
    0  1  2  3  4  5  6  7  8  9  10

Questions 13 & 14 ask, both in general and over the past 12 months, about you providing general education to patients with type 2 diabetes registered with your practice.

13. Is providing general education to patients with type 2 diabetes part of your clinical role?  
    ☐ Yes  GO TO Q14  ☐ No

14. Over the past 12 months, given 10 patients with diabetes, for how many did you provide general education about diabetes?  
    (Please circle one number)
    0  1  2  3  4  5  6  7  8  9  10

Thank you for completing this questionnaire. 
Please now return it to us in the pre-paid envelope provided.