Virtual *Conversation Map*® for Diabetes

Facilitator Guide



Session 7 Managing Diabetes Long-Term

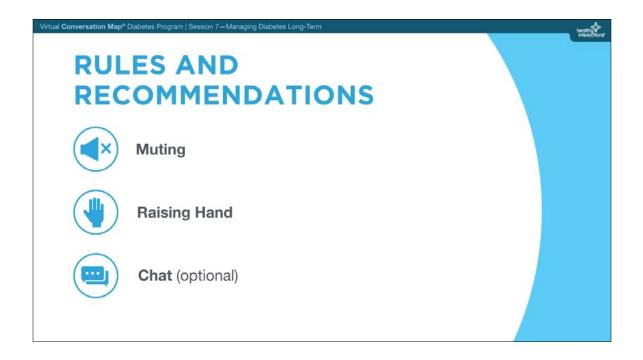




Welcome back! Again, my name is <your name> and and we are in the final couple sessions of the program. Great job so far! During today's session we will be focusing on **managing diabetes for the long-term**. (continue reading)

Just a few reminders...this program and process requires participation in the form of reading, listening, and talking, so you can learn from one another and make decisions to help you better manage your diabetes. (continue reading)

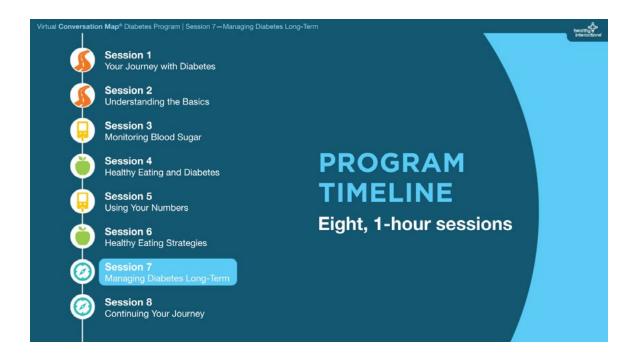
Today, we will be using a different *Conversation Map* which you should see on the right side of your screen. We will explore this Map visual more in a few minutes.



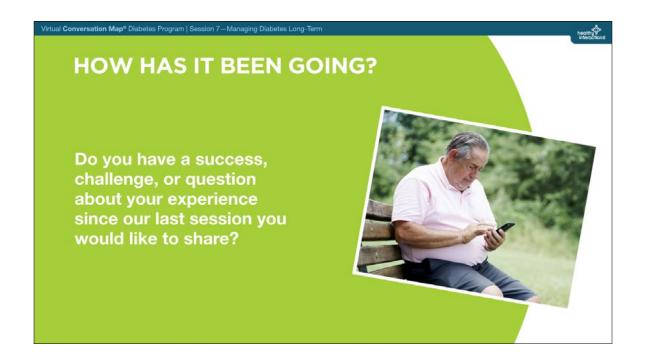
Does anyone need a refresher on muting and unmuting, raising their hand, (or the chat window)? (stop and discuss)

Visual Highlight:

Hover 🔀 your cursor over the *icons* to the left to direct participant's attention to the specific rule/recommendation while it is being described.



Today is session seven in our program and our focus will be on managing diabetes for the long-term.



Okay, with that let's get started by briefly discussing what you have been working on since our last session. Would anyone like to share something about their experiences since we last met, like a success, challenge, or question that has come up for you? (stop and discuss)

Thanks for sharing some of what you have been doing since our last session.



How did you do with your goals since we last met? What was that experience like? (stop and discuss)

That's great! Just remember, if questions come up outside of these sessions, I can also help if you send me a message through the *map4health*[®] app or otherwise.

Facilitator Tip:



As I mentioned earlier, we have a different *Conversation Map* visual for today's session. It should be up on your screen now. How would you describe what is going on in the visual? What are some of the things you notice or that stand out to you? (stop and discuss)

Good, you have highlighted and noticed many of the things we will be discussing today.



Visual Highlight:

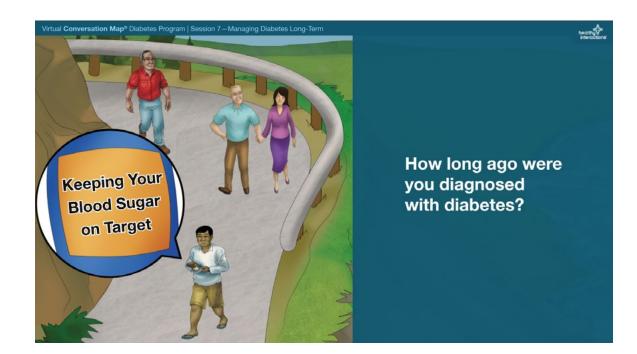
Hover 😡 your cursor over the *numbers* along the dotted line to direct participants' attention to each topic while it is being described.

Now, let's take a look at the specific topics we will be discussing in today's session. We will explore:

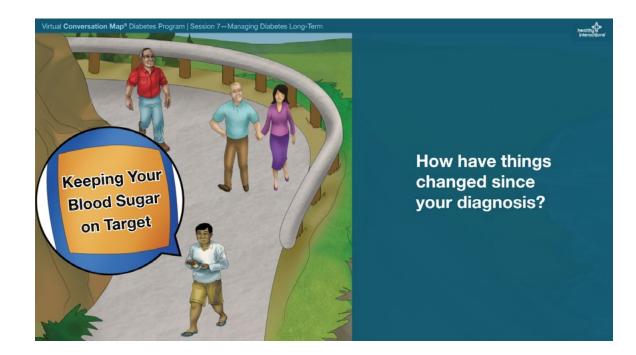
- 1. A review of the natural course of diabetes
- 2. Reducing the risk of long-term complications
- 3. How to keep your blood sugar on target
- 4. Diabetes medications and how they work in your body
- 5. Some of the basics of insulin and the different types of insulin
- 6. Setting goals



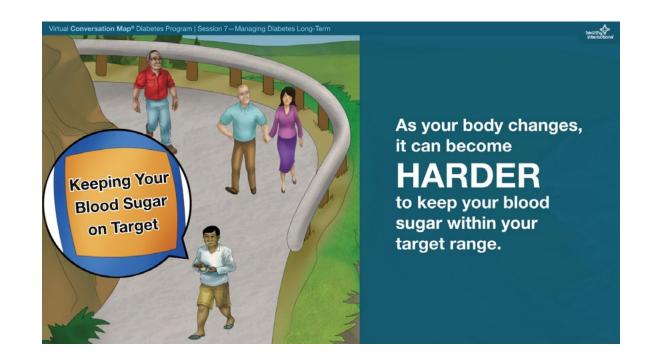
Let's start by focusing on the left side of the Map visual at the *people walking on the bridge* and discuss a couple of general questions.



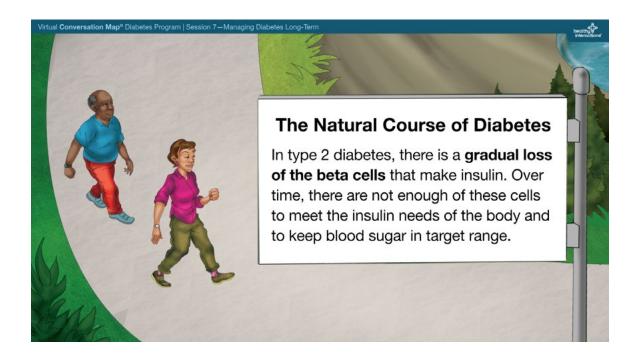
How long ago were you diagnosed with diabetes? (stop and discuss)



How have things changed since your initial diagnosis? (stop and discuss)



Diabetes is a lifelong disease. As your body changes, it can become harder to keep your blood sugar within your target range. Have any of you found this to be the case? (stop and discuss)

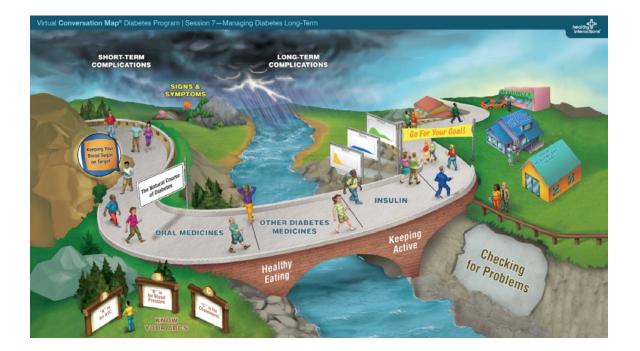


The reason for this is shown on the road sign labeled *"The Natural Course of Diabetes."* May I have a volunteer read aloud this information for the group? (stop and do)

In type 2 diabetes, there is a **gradual loss of the beta cells** that make insulin. Over time, there are not enough of these cells to meet the insulin needs of the body and to keep blood sugar in the target range.

Does this information make sense or does anyone have any questions about it? (stop and discuss)

Facilitator Tip:



Reducing your risk of long-term complications is an important reason to try and keep your blood sugar within your target range. Recognizing the signs and symptoms of high and low blood sugar can be helpful when trying to keep within your target range. You can also think of these signs and symptoms as the short-term complications of high and low blood sugar. (continue reading)

Let's look at some of the possible signs and symptoms of high and low blood sugar by diving into the *storm clouds* in the upper-left corner of the Map visual where there are a couple *hot air balloons*.



This slide contains an activity that requires you to click on a button(s) to complete the activity. Do not move on to the next slide until all buttons have been clicked.



Facilitator Tip:

Click 🏠 on the *orange hot air balloon* to reveal the signs of high blood sugar.

Increased urination
 Dry skin and mouth
 A cut or sore that won't heal
 Thirst
 Blurred vision
 Lack of energy

May I have someone read aloud the signs and symptoms of high blood sugar for the group? (stop and do)

Now could I have another volunteer read the signs and symptoms of low blood sugar for the group. (stop and do)

Facilitator Tip:		
Click 💫 on the <i>pink hot air balloon</i> to reveal the signs of low blood sugar.		
– Sweating Weakness – Hunger – Anxiety – Shaky	– Irritable – Not able to think clearly – Headache – Feeling drowsy	 Numbness or tingling around the lips Confusion Seizure

Do any of you experience any of these signs and symptoms of high or low blood sugar? That is, do you tend to know when your blood sugar is out of range by how it makes you feel? (stop and discuss)

For many people with diabetes, they don't always know when their blood sugar is out of range by the way they feel. So for many, the only way to know for sure is by monitoring your blood sugar. (continue reading)

Facilitator Tip:

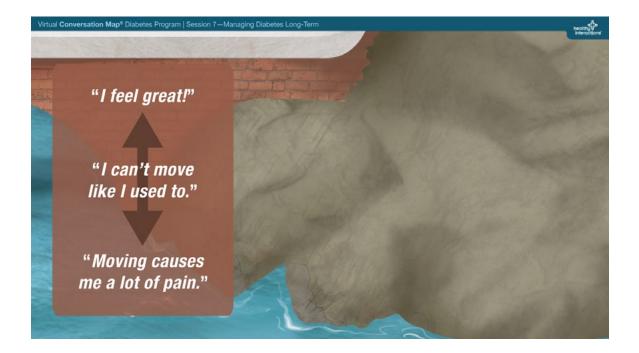


Let's continue by focusing on the things you can do to keep you blood sugar in your target range even with the natural course of diabetes. (continue reading)

Healthy eating and keeping active are always key to keeping your blood sugar in your target range. Why do you think the artist placed these on the *two pillars* of the *bridge*? (stop and discuss)



What experiences have you had when it comes to trying to eat healthy and be active? (stop and discuss)



Visual Highlight:

Hover 🔀 your cursor over the *quotes* on the double-arrow scale to highlight the specific feelings about physical activity.

Sometimes it can be difficult to add physical activity into your life when you have chronic pain or some other physical limitation, but that doesn't have to be a barrier to getting in some physical activity. (continue reading)

Most of us will fall somewhere along this spectrum in terms of how we feel about physical activity, but there are lots of activities you can do even if you feel limited by pain or other conditions.

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rtual Conversation Map® Diabetes Program | Session 7—Managing Diabetes Long-Te

Stationary bike Tennis Which activities or Biking Golf exercises might Jogging or Water aerobics or work best for you if running swimming laps MOVING **CAUSES YOU** ► Walking Lifting weights A LOT OF PAIN? Tai Chi Chair yoga Dance or light Balance exercises such as walking in place aerobics

Visual Highlight:

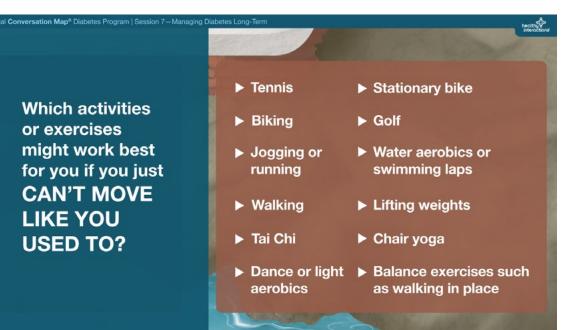
Hover 🔀 your cursor over the *bullet points* on the *types of activity* to highlight the specific examples of physical activity as they are referenced.

Listed on your screen now are several activities and exercises. If you felt like moving caused you a lot of pain, which activities or exercises might work better for you? (stop and discuss)

Facilitator Tip:

Participants may identify **walking**, **water aerobics or swimming laps, balance exercises such as walking in place**, and **chair yoga** as activities to do if feeling like moving causes lots of pain. Of course, it is always up to what they feel comfortable doing.

Which activities or exercises might work best for you if you just **CAN'T MOVE** LIKE YOU **USED TO?**



Visual Highlight:

Hover 🔀 your cursor over the *bullet points* on the *types of activity* to highlight the specific examples of physical activity as they are referenced.

How about if you felt like you just can't move like you used to? (stop and discuss)

Facilitator Tip:

Participants may identify golf, Tai Chi, dance or light aerobics, and stationary bike as activities to do if they felt like they can't move like they used to. Of course, it is always up to what they feel comfortable doing.



Visual Highlight:

Hover 🔀 your cursor over the *bullet points* on the *types of activity* to highlight the specific examples of physical activity as they are referenced.

What activities or exercises would you consider if you were feeling great? (stop and discuss)

Facilitator Tip:

Participants may identify **tennis, biking, jogging or running** and **lifting weights** as activities to do if they were feeling great. Of course, it is always up to what they feel comfortable doing.



What has your experience been with keeping active over the past year or so? (stop and discuss)

Do you have any questions about keeping active and exercise that you would like to discuss before we move on to the next topic? (stop and discuss)

Facilitator Tip:



In addition to healthy eating and physical activity, taking your medications is a key aspect of managing your diabetes. Many people with diabetes will need to take one or more diabetes medicines from the time of diagnosis. There are different types of diabetes medicines that work in different areas of the body.

Facilitator Tip:

For information on oral medications, insulin, and injectables you can go to the American Diabetes Association website: <u>www.diabetes.org</u> as well as reference the American Diabetes Associations' annual publication of the Standards of Medical Care in Diabetes: <u>https://professional.diabetes.org/content-page/practice-guidelines-resources</u>



This slide contains an activity that requires you to click on a button(s) to complete the activity. Do not move on to the next slide until all buttons have been clicked.

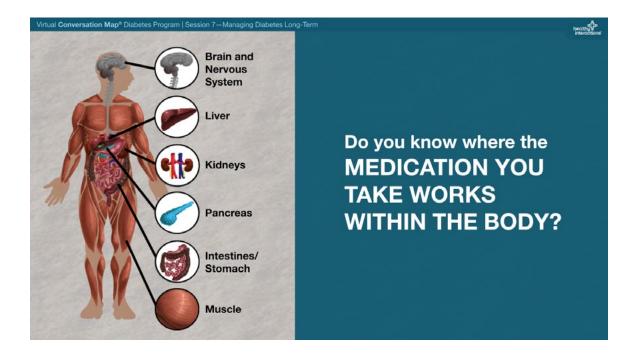
Let's take a look at how different diabetes medications work on the body starting at the top of the body and working down. (continue reading)



Facilitator Tip:

Click 💫 on each *circle* to reveal the description of each part of the body where medicine works as it is being described. Feel free to read the desriptions or ask for a volunteer.

T	Certain medicines work in the brain and nervous system to increase metabolism and sensitivity to insulin.	
	In the liver , certain medicines slow the production and release of glucose (sugar) so that you need less insulin.	
	Next, kidneys . Certain medicines work by blocking glucose (or sugar) from being re-absorbed in the kidneys, which means more glucose is removed from the body through urine.	
	Certain medicines stimulate the pancreas to release more insulin.	
	Some medicines work in the intestines and stomach to delay the breakdown of carbohydrates (like bread and pasta) which reduces the peak of blood sugar after eating.)	
	And finally, certain medicines work by increasing insulin sensitivity in muscle tissue so that glucose (sugar) can be absorbed better	

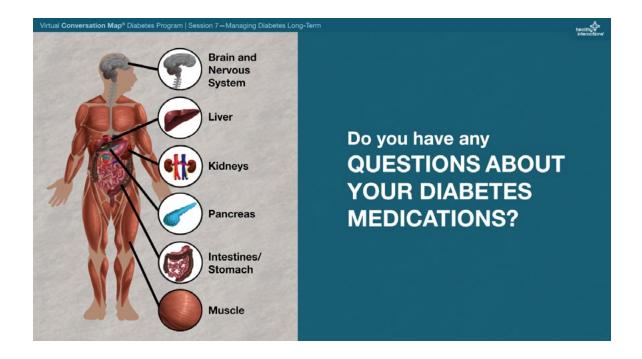


Facilitator Tip:

Recall last session, we asked participants to come to the session with some questions about their medications to review them with the entire group. If no one sent you any questions, you may skip this question and go to the next question.

Last time, I asked you to record any questions you had about your medications in your journal or in the *map4health*[®] app. If you were able to do that, please take a look at your list now. (continue reading)

Would anyone like to share with the group one of the medications from your list and as a group let's identify where in the body we think that medication works? (stop and discuss)



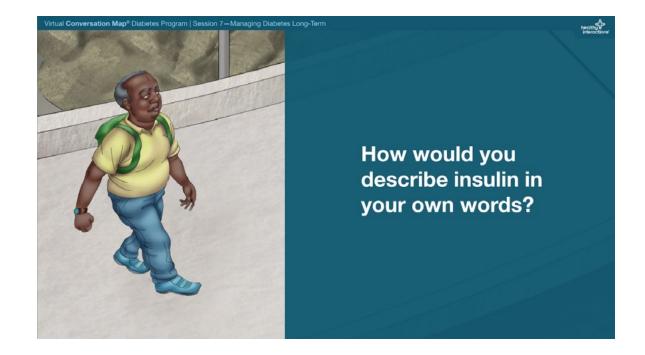
Does anyone have any questions about their diabetes medications, or diabetes medications in general, that they would like to discuss? (stop and discuss)

Facilitator Tip:

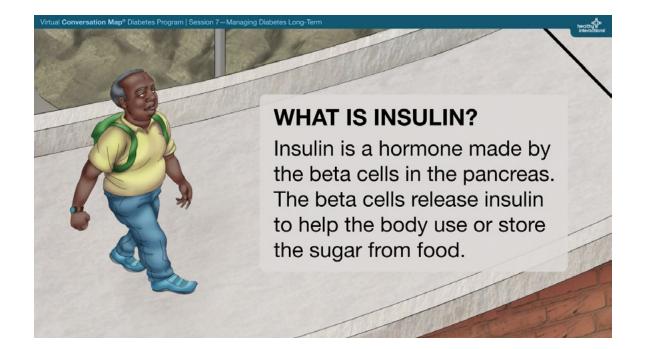


As mentioned earlier, over the natural course or progression of diabetes, your pancreas may no longer be able to keep up with your need for insulin. That's why many people with diabetes eventually need to take insulin. Taking insulin does not mean you have failed to manage your diabetes. It just means it is what your body needs to best manage blood sugar levels. (continue reading)

Let's start this section about insulin with an explanation of what insulin is and dive into the area on the right side of the *bridge*.



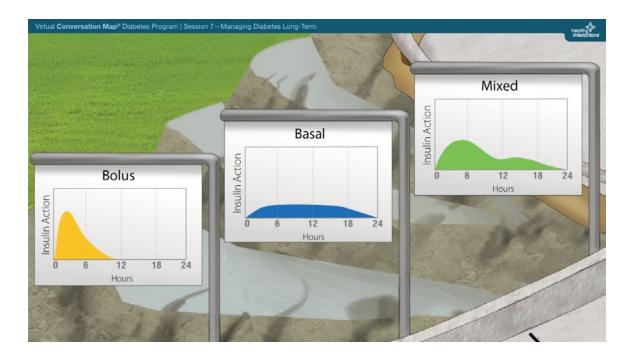
How would you describe insulin and how it works in your own words? (stop and discuss)



Now let's take a look at a general definition of insulin. You should now see a definition of insulin on your screen. May I have a volunteer read aloud this definition for the group? (stop and do)

Insulin is a hormone made by the beta cells in the pancreas. The beta cells release insulin to help the body use or store the sugar from food.

Is any of this information new to you or do you have any questions about it? (stop and discuss)



When the pancreas is able to function normally, it releases insulin appropriately to match the levels of glucose in the blood. But as we discussed earlier, when the pancreas is no longer able to make enough insulin, a person with diabetes may need to take insulin to ensure that the body has enough to maintain target blood glucose levels. (continue reading)

There are different types of insulin that a provider may prescribe as each one is meant to mimic the action of the pancreas. The different types are defined by when they start working (onset), when they are most effective (peak action), and how long they last (duration). Let's take a closer look at the different types of insulin. (continue reading)

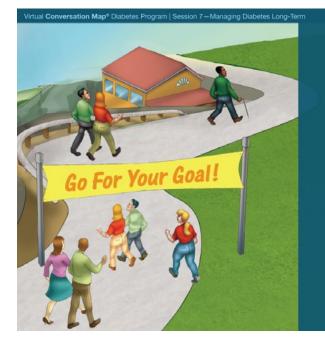
Take a look at the information on your screen about how the three different types of insulin work—their onset, peak and duration. May I have a volunteer describe the information shown here about the three different types of insulin? (stop and do)

Do you have any questions about this information, or insulin in general, that you would like to discuss before we move to the next topic? (stop and discuss)

Facilitator Tip:



Medications are likely to play an ongoing role in helping you manage your diabetes. Remember, that for most people, the medications they take tend to change over time based on what is happening in their bodies and what will best help them. Also, it is often common for people to need to take more than one medication at the same time to help them effectively manage their blood sugar levels.



WHAT WAS MOST MEANINGFUL TO YOU?

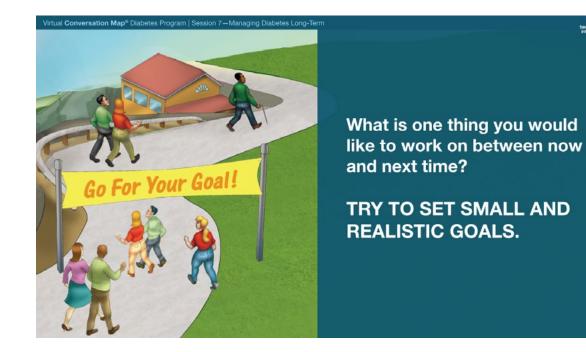
health

What information from this session can you share with your support network?

Take a moment to think about everything we have discussed during this session. What was most meaningful to you personally? (stop and discuss)

What information from this session can you share with your support network so they can better help you achieve your goal(s)? (stop and discuss)

health



As we discussed in previous sessions, I will encourage you to set and work on various goals over the course of this program. (continue reading)

What is one thing related to your diabetes self-management you would like to work on, or continue to work on, between now and next time (i.e., your near-term goal(s))? This can be the same goal from the last session or a different goal. (stop and discuss)

The big and small steps you take throughout the 8 sessions of this program can begin to reshape how you manage your diabetes. So, to wrap up today's session, let's talk a little bit about another activity I would like you to try from now until we meet next time.



Our next session is our final session and we will be discussing how to manage your diabetes for the long-term. Even though next time will be our last session, I will still be a resource for you, and you can continue to connect with me on the *map4health*[®] app. (continue reading)

Between now and next time, I'd like you to think about a longer-term goal—something you would like to accomplish over the next year or so. You can either set that goal in map4health app with the goal-setting feature, send me a message in the *map4health* app with your thoughts, or jot down your long-term goal in a journal. (continue reading)

Also, I'd like you to think of a way you can share some of those goals with your support network, including your healthcare team. Does that assignment make sense to everyone or do you have any questions about it? (stop and discuss)

Facilitator Tip:



Thank you very much for your participation today. With our next session you will have completed this program! I look forward to talking with you in our final session scheduled for <a href="mailto:

<identify time and date for the group>

. (continue reading)

Are there any final thoughts or questions before we end our session? (stop and discuss)

Facilitator Tip:

Address any questions/thoughts in the *chat box* that haven't been discussed yet.

Again, thanks very much and I will see you next time.

END SESSION

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