Diabetes Mellitus (DM) is a chronic disease that affects many individuals in the United States. It was reported that a total of $245 billion is spent annually on both direct and indirect health care costs associated with the treatment of diabetes and diabetic related complications. Diabetes related complications can be prevented or delayed if proper education is done and individuals are willing to practice positive behavior changes and self-manage their disease. The purpose of this doctoral capstone project was to promote behavior changes in patients with diabetes through diabetes self-management education (DSME) in shared medical appointments (SMAs).

This project was implemented in a rural health care clinic located in the Mississippi Delta in patients with type 2 diabetes mellitus (T2DM). Participants were provided evidence-based DSME two weeks apart through two SMAs. The Diabetes Self-Management Report Tool (D-SMART) was used to collect behavior practices before and after implementing two SMAs, and results were compared to determine if behavior changes occurred among individuals who participated in this project. The doctoral capstone project used a descriptive study design to demonstrate how SMAs affect behavior changes in individuals with diabetes. SMAs are an innovative system redesign concept with the potential to provide comprehensive and coordinated care for patients with chronic health conditions while still being efficient, effective, financially viable and sustainable. The assessment of a participant’s behavior before and following the SMAs with DSME demonstrated positive behavior changes in areas such as healthy eating and activity. The transtheoretical model of behavior change (TTM) provided a framework for the advanced practice nurse (APN) to motivate individuals with DM to make healthy decisions and adopt healthy lifestyles in the daily management of their DM. The intervention of SMAs with evidence-based DSME motivated patients to make positive behavior changes.