

Questionnaire Delphi panel healthcare providers

1. What is your age?
2. What is your gender?
 - Man
 - Woman
3. What is your profession?
 - Pharmacist
 - Diabetes nurse
 - Dietician
 - General practitioner
 - Internist
 - Practice nurse
 - Psychologist
4. Where do you work?
 - Primary care
 - Secondary care
 - Other,
5. How many years of experience do you have treating patients with type 2 diabetes?
6. You treat multiple patients. Most likely not all of these patients have type 2 diabetes. What percentage of the total number of patients you treat has type 2 diabetes?

The next questions are about relevant patient characteristics for estimating healthcare needs of patients with type 2 diabetes. The healthcare needs are subdivided into person-related and health-related characteristics.

7. How relevant do you think these person-related patient characteristics are for estimating healthcare needs of patients with type 2 diabetes?

Characteristics	Not at all relevant	Not relevant	Neutral	Relevant	Very relevant
Age	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sex	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Educational level	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Self-efficacy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Income	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Quality of life	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

8. Could you clarify for at least 3 person-related patient characteristics from the previous question why you find them relevant or not?

9. How relevant do you think these health-related patient characteristics are for estimating healthcare needs of patients with type 2 diabetes?

Characteristics	Not at all relevant	Not relevant	Neutral	Relevant	Very relevant
HbA1c	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Systolic blood pressure	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
LDL-cholesterol	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Body Mass Index (BMI)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Cardiovascular disease	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Nephropathy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Neuropathy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Diabetes duration	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Glucose lowering drugs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Diabetes related distress	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

10. Could you clarify for at least 5 health-related characteristics from the previous question why you find them relevant or not?

11. Are there other characteristics that were not named, but that you find relevant for estimating the healthcare needs of patients with type 2 diabetes?

- Yes (*continue to question 12*)
- No (*continue to question 13*)

12. Which other characteristics, according to you, are relevant for estimating the healthcare needs of patients with type 2 diabetes?

13. Below you can add your top 5 of the previously mentioned characteristics that you found relevant. Add a 1 to the characteristic that you find most relevant, a 2 to the characteristic that you find most relevant thereafter, etc. You may also add characteristics that were not previously mentioned, but that you do find relevant.

age Sex Educational level

Quality of life Income Self-efficacy

HbA1c Systolic blood pressure LDL-cholesterol

Triglycerides Body Mass Index Cardiovascular disease

Nephropathy Diabetes duration Glucose lowering drugs

Diabetes-related distress

Other,

Other,

14. Could you please explain your top 5?

Thank you very much for filling in the questionnaire.

Questionnaire Delphi panel patients

15. What is your gender?

- Man
- Woman

16. What is your highest level of school completed?

- None/elementary school
- VMBO/MAVO/LBO
- MBO (MTS, MEAO)
- HAVO/VWO (HBS, MMS)
- HBO/WO (HTS, HEAO)

17. What is your birth country?

- the Netherlands
- Surinam
- Netherlands Antilles
- Aruba
- Turkey
- Marocco
- Other,

18. In what year were you diagnosed with type 2 diabetes?

19. What glucose lowering drug(s) do you use?

- None
- Oral
- Insulin
- Oral and insulin

The next questions are about which characteristics you find relevant for estimating how many contact moments you need with your general practitioner, practice nurse or diabetes nurse.

We start with an example. You do not have to answer this example.

Example:

State for the characteristic below (hair colour) how relevant you think this characteristic is for estimating the number of contact moments you need with your general practitioner, practice nurse or diabetes nurse:

	Not at all relevant	Not relevant	Neutral	Relevant	Very relevant
Hair colour	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Imagine you have red hair. You think that because of your red hair, you need more contact moments with your general practitioner, practice nurse or diabetes nurse. Therefore, you find hair color relevant or very relevant and you add a cross under 'relevant' or 'very relevant':

	Not at all relevant	Not relevant	Neutral	Relevant	Very relevant
Hair colour	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

You might think that you need the exact same number of contact moments with your general practitioner, practice nurse or diabetes nurse as people with another hair colour. In that case, you add a cross under 'not relevant' or 'not at all relevant':

	Not at all relevant	Not relevant	Neutral	Relevant	Very relevant
Hair colour	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

This was the example. On the next page questions are asked about the characteristics that are important for the study.

20. State for each characteristic how relevant you think the characteristic is for estimating the number of contact moments with your general practitioner, practice nurse or diabetes nurse:

Characteristics	Not at all relevant	Not relevant	Neutral	Relevant	Very relevant
Age	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sex	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Educational level	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Quality of life	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Income	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Self-efficacy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Blood sugar	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Weight	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Diabetes duration	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Stress	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Social support	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Diabetes medication	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Having other diseases	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

21. Could you clarify for a few characteristics why you find them relevant or not?

8. Are there other characteristics that were not named, but that you find relevant for estimating the number of contact moments with your general practitioner, practice nurse or diabetes nurse?

- Yes (*continue to question 9*)
- Nee (*continue to question 10*)

9. Which characteristics, according to you, are relevant for estimating the number of contact moments with your general practitioner, practice nurse or diabetes nurse?

10. Below you can add your top 5 of the previously mentioned characteristics that you found relevant. Add a 1 to the characteristic that you find most relevant, a 2 to the characteristic that you find most relevant thereafter, etc. You may also add characteristics that were not previously mentioned, but that you do find relevant.

- | | | |
|--|---|--|
| <input type="checkbox"/> age | <input type="checkbox"/> Sex | <input type="checkbox"/> Educational level |
| <input type="checkbox"/> Quality of life | <input type="checkbox"/> Income | <input type="checkbox"/> Self efficacy |
| <input type="checkbox"/> Blood sugar | <input type="checkbox"/> Weight | <input type="checkbox"/> Having other diseases |
| <input type="checkbox"/> Stress | <input type="checkbox"/> Social support | <input type="checkbox"/> Diabetes duration |
| <input type="checkbox"/> Diabetes medication | | |

Other,

Other,

11. Could you please explain your top 5?

Thank you very much for filling in the questionnaire.