

Self-assessment questionnaire

Participant code: _____

Date: _____

How do you assess your competence in the following areas?
Please check the boxes.

1. I feel competent in counseling a patient with diabetes mellitus.	<input type="checkbox"/> Strongly disagree	<input type="checkbox"/> Disagree	<input type="checkbox"/> Slightly disagree	<input type="checkbox"/> Slightly agree	<input type="checkbox"/> Agree	<input type="checkbox"/> Strongly agree
2. I feel competent to motivate a patient to carry out the therapy.	<input type="checkbox"/> Strongly disagree	<input type="checkbox"/> Disagree	<input type="checkbox"/> Slightly disagree	<input type="checkbox"/> Slightly agree	<input type="checkbox"/> Agree	<input type="checkbox"/> Strongly agree
3. I feel able to listen actively during a consultation.	<input type="checkbox"/> Strongly disagree	<input type="checkbox"/> Disagree	<input type="checkbox"/> Slightly disagree	<input type="checkbox"/> Slightly agree	<input type="checkbox"/> Agree	<input type="checkbox"/> Strongly agree
4. I feel able to guide the patient through questions.	<input type="checkbox"/> Strongly disagree	<input type="checkbox"/> Disagree	<input type="checkbox"/> Slightly disagree	<input type="checkbox"/> Slightly agree	<input type="checkbox"/> Agree	<input type="checkbox"/> Strongly agree
5. I feel able to structure a consultation based on the time available (10 minutes).	<input type="checkbox"/> Strongly disagree	<input type="checkbox"/> Disagree	<input type="checkbox"/> Slightly disagree	<input type="checkbox"/> Slightly agree	<input type="checkbox"/> Agree	<input type="checkbox"/> Strongly agree
6. I feel competent to pass on correct, relevant, and useful information to the patient during the counseling.	<input type="checkbox"/> Strongly disagree	<input type="checkbox"/> Disagree	<input type="checkbox"/> Slightly disagree	<input type="checkbox"/> Slightly agree	<input type="checkbox"/> Agree	<input type="checkbox"/> Strongly agree
7. I feel competent to convey my specialist knowledge in lay language.	<input type="checkbox"/> Strongly disagree	<input type="checkbox"/> Disagree	<input type="checkbox"/> Slightly disagree	<input type="checkbox"/> Slightly agree	<input type="checkbox"/> Agree	<input type="checkbox"/> Strongly agree