Patient survey for “SC MOMs”: integrated care for diabetic pregnancies in South Carolina

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Introduction & Objective

In South Carolina, diabetic pregnancies are impacted by racial, economic, and geographic disparities, highlighting the need for equitable, patient-centered care. **The Management of Maternal Diabetes in SC (“SC MOMs”) Program** is a statewide initiative implemented at three clinical sites to deliver team-based, “one-stop shop” prenatal care for individuals with diabetes in pregnancy, with the goal of improving outcomes and reducing disparities.

To evaluate patient experience and guide future program development, a survey was conducted among SC MOMs participants either at ≥32 weeks gestation or 6-12 weeks postpartum.

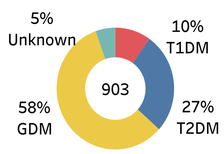
Methods

Survey instruments included questions assessing satisfaction with overall patient experience, patient care, and diabetes education. The questionnaire also incorporated the Stanford Self-Efficacy for Diabetes Scale and items evaluating perceived benefits and burdens of continuous glucose monitoring (CGM). Satisfaction and experience items were rated on a 1–5 Likert scale, while self-efficacy items used a 1–10 scale.

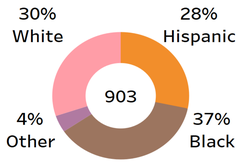
The survey was administered between August 2023 and September 2025 (N = 903, 28% of entire SC MOMs cohort). Results summarize the percentage of responses in each category and the average Likert score per question across the cohort.

Results

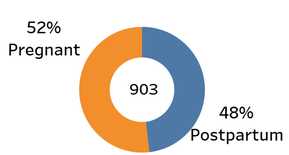
Diabetes type



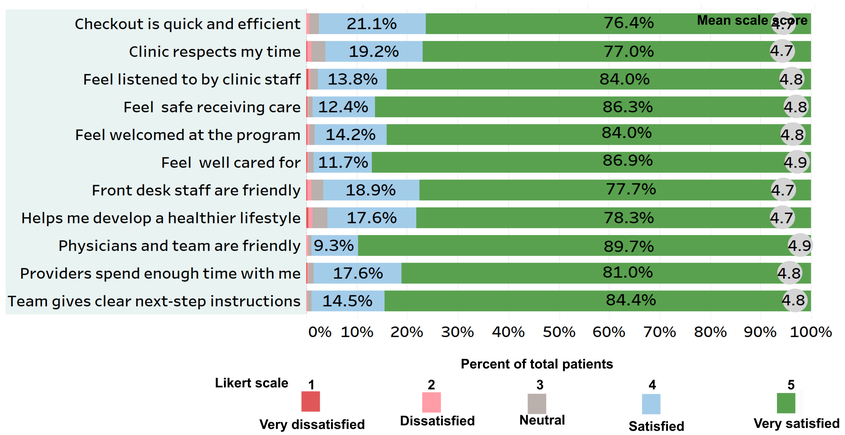
Race



Pregnant status

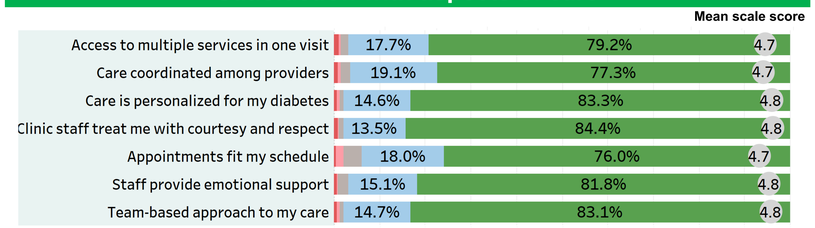


General experience of SC MOMs

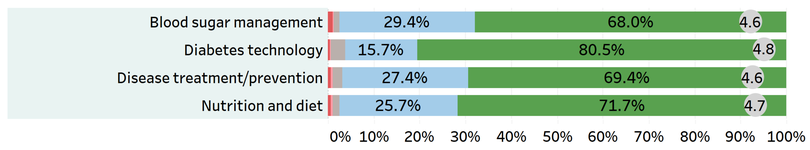


Results

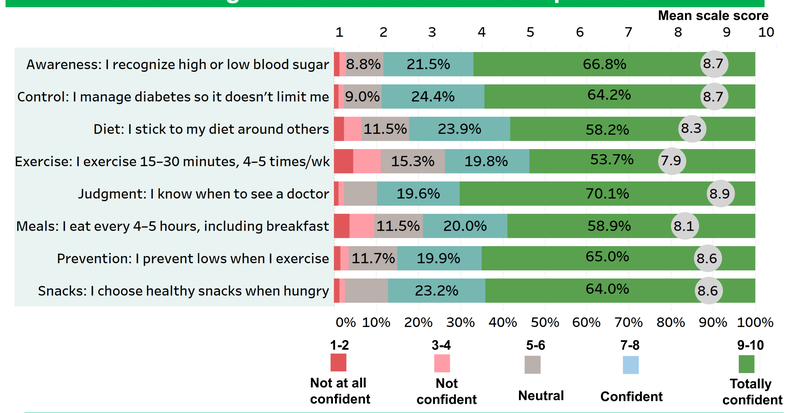
Satisfaction with aspects of care



Patient education: I gained understanding of:



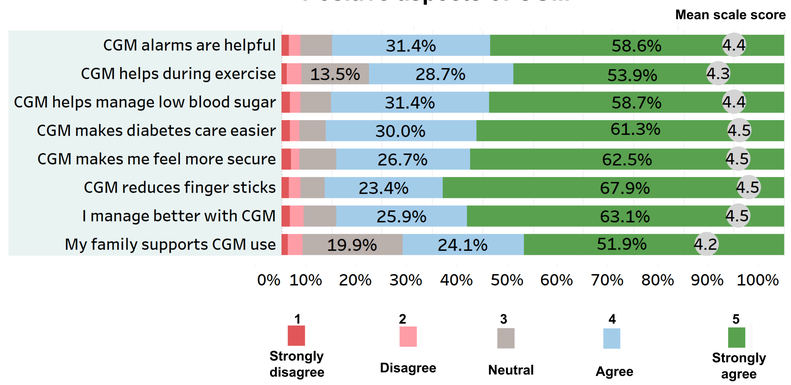
Self-managment: confidence and competence *



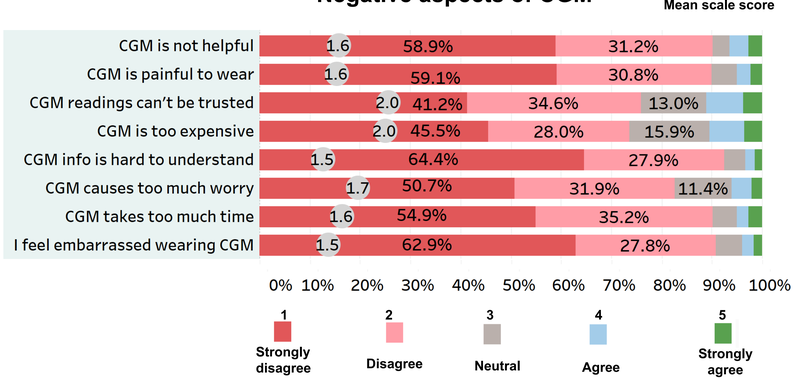
* Stanford Self-Efficacy scores (1–10) indicate patient confidence in managing diabetes: 1 = Not at all confident, 10 = Totally confident. Patients rated each item on a 1–10 scale. Analysis categories are shown in the legend above.

CGM: Benefits & Burdens

Positive aspects of CGM



Negative aspects of CGM



Summary

Participants reported high satisfaction with the overall program, patient care, and diabetes education, along with strong confidence in their ability to manage diabetes and positive perceptions of CGM use. We also analyzed these responses by diabetes type, race, and pregnancy status, and found no statistically significant differences across subgroups (data not shown). These findings indicate that patients value the SC MOMs model of care, underscoring the importance of accessible, coordinated, and technology-supported prenatal care for individuals with diabetes.

Acknowledgements

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SCMOMs
Diabetes care for a healthy pregnancy