

Standard 3

Patient Population (sources: 2008 CDC estimates of adults 20+ yrs and 2010 Census data)

County	1	2	3	4
Total population	432,488	130,219	42,514	149,208
% with diabetes	10.8	10.2	13.5	8.1
Total pop with diabetes	46,708	13,282	5,739	12,086
% under age 18	23.1	20.5	24	21.9
% over age 65	15.4	15.4	17.1	16.9
% White	74.8	93.4	97.1	94.8
% African American	20	2.8	.7	2.4
% Asian	1.7	1.8	.4	.6
% Hispanic/Latino	6.9	5.5	8.5	3.5
% non-English speaking	6.2	5.7	4.3	3.2
% age 25+ are high school grads	88.4	94.1	90.2	90.2
% uninsured	12	7		8.9
Avg household income	41,777	53,577	55,120	55,653

Access to Diabetes Education

There are several ADA recognized and AADE accredited programs in our community. All these sites offer disease and lifestyle education and diabetes management. These programs are often rigid with scheduling of classes and appointments, which does not leave many options for the working class. Another hurdle for patients is that these other facilities are located within a hospital or pharmacy which may not be as convenient as education provided directly in the physician office. Our DSMES services are designed to allow for more flexibility to patient schedules than other programs in the area and are provided directly in a physician office for ease of access and care coordination.

Resources to Meet Target Population Needs

Limited or No DSMES or MNT Coverage

If a patient is Type I, they can call JDRF and ask for an Adult Type I Tool Kit. There is also a Care Pack for adults newly diagnosed with Type I.

If Type II, patients can call the American Diabetes Association Center for Information and Community Support at 1-800-DIABETES (1-800-342-2383). They can enroll in the "Living with Type 2" program and have information mailed.

The program representative can also refer Type II patients to the following local education resources as appropriate:

- YMCA Wellness Center for free, 8-week long diabetes seminars. Attendance can earn the patient a 12-week membership to the YMCA.
- Community Health Center- Offers blood sugar screening and diabetes education classes. Payment is on a sliding scale.
- County Health and Wellness Center has nurse practitioners that patients can see. They then can see a pharmacy student team from the University for diabetes education. Fees are based upon income. A small fee is requested from all patients to help offset the cost of care.
- County Extension holds a series of classes called Dining with Diabetes. This class helps individuals learn strategies to manage their diabetes through menu planning, carbohydrate counting, portion control, label reading, and taste testing healthy recipes.
- County Health Department diabetes education for seniors. Appointments are required.

Limited Ability to Pay for Prescriptions and/or Testing Supplies

Patients will be advised by educators to check their insurance formulary to see which brand of meters and strips are preferred. Patients can also consider purchasing a generic meter at a chain store such as Kroger. The meter is very inexpensive, and the strips are also reasonably priced. This is helpful if the patient must pay cash for their testing supplies. The Kroger meter seems to be more accurate than other chain store generic meters. If the patient is wasting strips trying to sample, they may want to consider a meter with "second chance sampling". These meters are the AccuChec Nano, One Touch Verio IQ or either of the FreeStyle meters.

Educators may also advise patients to check their insurance company or PBM for a medication review to see if changes can be made to cheaper medications. The patient would then need to discuss the possible changes with their doctor. Educators can check for prescription co-pay discount cards from the manufacturers or advise them to see if their doctor has any in

office. The Partnership for Prescription Assistance can also be a helpful resource for patients. Their number is 1-888-477-2669 or there are tear off sheets available in the education rooms. If a patient needs immediate assistance, such as they can't pay a copay to get scripts or they ran out of medications, local aid organizations can sometimes help. Educators would advise patients to contact United Way by calling 211.

Physical Limitations

For patients with physical limitations (significant percentage of target population) the following will be done:

- The DSMES services will be in a handicap-accessible location.
- Wheelchairs with high weight capacity are available for use during health education appointments. Patients with poor balance and/or body coordination will be advised to use the grab bars when weighing on our scales and educators will hold the chairs with wheels for patients so the chair does not roll back on a patient while they are trying to sit down or stand up.
- Chairs capable of holding weights of up to 400lbs are available in the patient education rooms and waiting rooms. Chairs are available in the waiting room that can hold greater than 500lbs and can be moved into the patient education rooms.

Hearing and Speech Impairment (<1% of program target population)

- Hearing and speech impaired patients that require the use of a sign language interpreter will be offered services for Professional Interpreters for the Deaf or by contacting preferred Practice Location Providers for these services. The Office Manager will contact the interpreter service and arrange for their participation in the appointment.

Vision Impairment (<1% of program target population)

- Diabetes nutrition information can be printed from The Nutrition Care Manual in large print
- "Take Charge of Your Diabetes" are large print books that can be used for general education
- Care plan and self-management plans can be typed in large print individually for patients who require large print materials.
- Arrangements can also be made to obtain Braille materials
- For patients that need adaptive equipment or low vision training, they can be advised to contact The Sight Center
- Patients can also utilize talking meters. A list of meters and their features is found at diabetesforecast.org/2014/Jan/images/blood-glucose-meters-chart.pdf

Low-Literacy

- Utilize typed or written materials designed for patients with low-literacy. Avoid use of materials written at greater than 5th grade reading level.
- Utilize conversation and hands on teaching methods
- Assure patients are demonstrating and teaching back key concepts learned
- Avoid directing patients to read materials aloud in class. Seek volunteers to read them instead in a group setting.

Cultural and Religious Considerations

- Changes in eating and medication routines may need to be adjusted due to: Fasting: Lent, Ramadan and other Muslim fasting days, Jewish fasting days, Kosher dietary rules, avoidance of pork, avoidance of meat during Lent, Holidays: large meals, special foods eaten only during the holiday time

Transportation Issues

Staff may direct patients with transportation issues to the following resources:

- Arrange for Uber or Lyft transport
- Advise patient to contact public transportation for the county to arrange pick up at their home. At least 24-hour notice must be provided for this service.
- Advise patient that many local insurance plans provide free transportation to and from medical appointments and he/she could contact their insurance plan to arrange this service if available.
- Advise patients to contact United Way by calling 211 to make arrangements for free or low-cost transportation.

Patient Perceived Lack of Need for Diabetes Education Services

Staff will perform the following to increase awareness of the importance of diabetes education services:

- Participate regularly in local health fairs
- Conduct free, brief diabetes and nutrition education classes in community centers, senior centers, and local churches. Often after patients start to receive some of the free education in these sessions they start to realize they would like to learn more.
- Perform queries in the EMR to identify patients with high A1C or past due on an A1C check. Obtain referrals for these patients from their physician and contact appropriate patients to schedule for services. Discuss benefits of diabetes education and how the services can help that person during first contact.