

### III. STANDARD 3: Evaluation of the Population Served

1. **Community Demographics:** Data from Census.gov accessed May 30, 2018.

a. **County** 14,125 residents

i. Ethnicity 41.2% white 56.3% black 6% Hispanic

ii. Gender 44.2% female

iii. Age 20% under 18 14.2% over 65

iv. Level of Education 67.3% graduated high school 8.9% college

v. Prevalence Diabetes 15.3%

vi. Uninsured 16.1%

vii. Mean travel to work 24 minutes

viii. Poverty 37.2%

ix. Per capita income \$12,747

b. **County** 21,087 residents

i. Ethnicity 55.7% white 42.7% black 1.3% Hispanic

ii. Gender 52.4% female

iii. Age 23.6% under 18 17.3% over 65

iv. Level of Education 77.3% graduated high school 16.8% college

v. Prevalence Diabetes 14.5%

vi. Uninsured 15.0%

vii. Mean travel to work 18.3 minutes

viii. Poverty 22.5%

ix. Per capita income \$20,562

2. **Target population:** Our program will focus on residents from 2 Counties as well as those from surrounding counties who utilize our clinics who have diabetes or pre-diabetes. Care givers and parents may also participate and will pay a flat fee.

3. **Recognizing Potential Barriers:** It may be difficult for residents to receive education and care for diabetes outside of the clinical or hospital setting because both counties are very rural, and people must travel long distances from their homes; transportation is

especially limited, as most residents are very low income. Further, health literacy and socioeconomic status may be barriers as well. For participants without health insurance, they will be able to take the

class and will pay based on a sliding fee scale according to their income. We will also connect people without insurance patient navigators in order to try to get them insurance.

**4. Allocation of resources to meet population needs:**

a. Our staff is culturally sensitive and respectful of the needs of this population.

One of our instructors was a home health nurse for over 10 years and she is very familiar with working with low income and elderly individuals.

b. Whenever handouts or materials are given out that we create and aren't part of the established curriculum, they will be developed with large print, simple terms, and at or below a 5th grade reading level, with culturally appropriate graphics.

c. The Wellness Center, where some of the classes will be held is a beautiful state-of-the-art wellness and exercise facility. It has plenty of classroom space with comfortable chairs, is ADA compliant, accessible by bus, non-clinical and has private rooms for patient meetings. The Clinic will also be a site for classes. The clinic has newly renovated classroom space, comfortable seating and is ADA compliant and spacious. The site for County will be in the hospital in rooms specifically designated for education and teaching. Rooms have all necessary amenities and are ADA compliant. All the spaces have adequate technology and internet.

d. The Wellness Center will also provide reduced cost membership to all program participants once they complete the program. Participants will also get free membership for the duration of the 6-week group-based program.

e. The MASTER Plan will also include cooking classes for participants using the Wellness Center's kitchen and the evidenced-based Cooking Matters Curriculum.