About Our Program

I work in an inpatient setting, offering education and care to those in the hospital who might benefit from or request these services. We also make one-on-one sessions with family involved available to individuals.

Small Connections Go a Long Way!

Providing diabetes care and education in the hospital setting can be challenging. However, taking the time to **sit down at eye level with a person** can make a huge difference. When you walk into the room, make sure they feel well enough to talk at that time. If not, offer to come back at a different time, and offer a quick pop-in the next day to see if there are any follow-up questions or concerns.

**Ask questions and be aware of culture and lifestyle.** What kind of work do they do? What shift? How many meals do they eat? Any restrictions on their meals or types of food? How do you do x, y, z at home?

I also like to **ask the person what kinds of concerns or barriers they may be facing** when managing their diabetes at home. It’s amazing how empowering that one little question can be. It makes people reflect and sometimes they are able to say something like “I just can’t afford the medication”.

Be ready for anything to come out of someone’s mouth…and know, there might be tears. It’s amazing what we can learn when you give your clients “permission” to start talking about things that affect their blood sugars. The energy in the room can completely change and you can watch the weight lift off their shoulders.

If you are new to a community, **talk with your colleagues about local practices.** Be aware of holidays or local religious practices that might need special attention. We hear a lot about fasting during Ramadan and Yom Kippur, but in my area, there are many churches who incorporate days of fasting as well. The only way to truly know if this is something that is being practiced, is to ask.

For additional tips, visit [DiabetesEducator.org/EngagingDSMES](http://DiabetesEducator.org/EngagingDSMES).