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Diabetes connect: A diabetes self-management education and support (DSME/S) program for Saint Anthony hospital community

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Introduction: Diabetes is increasing at an alarming rate nationwide affecting mostly minorities. In fact, Saint Anthony Hospital (SAH) community in Chicago has a significant increase of diabetes prevalence from 8% in 2009 to 17% in 2015. SAH predominantly serves Hispanics (49%) followed by African-Americans (26%). Also, population assessment and chart reviews conducted in collaboration with SAH key stakeholders shows a high rate of uncontrolled diabetes (blood glucose of >212 mg/dl) and has led to increased emergency department visits.

Purpose: A diabetic wellness and education program following American Diabetes Association guidelines has been developed to address the problem with a focus on diabetes self-management education and support (DSME/S).

Methods: DSME/S is the delivery of knowledge, skills and capacity needed for diabetes self-care with support for achieving and sustaining behaviors and coping skills needed for self-management after education. Following the PRECEDE-PROCEED planning framework, the program was divided into two phases. Phase one addressed organization change using Lewin's planned change theory. Phase two was implementation of SAH redesigned DSME/S program called 'Diabetes Connect' using Bandura's social cognitive theory for individual change. The program was delivered in English and Spanish in summer 2017. It includes four weeklies 90-120-minute sessions using Conversation Maps®. Recruitment sites were an SAH satellite primary care clinic and the emergency department. Phase three, an addendum to the initial program, involved using a multimodal community based recruitment plan. Program objectives includes increasing diabetes knowledge scores through a pre- and post-test on knowledge using the Conversation Maps® as well as increase in diabetes self-efficacy scores using the Stanford Scale.

Results: Two out of 13 participants completed the program necessitating a change in approach to recruitment and retention efforts. The multimodal community based recruitment plan took effect fall of 2017 and will conclude on the first week of October. The DSME/S program outcomes will be presented.

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