

Community Health Needs Assessment Implementation Plan Progress Report

Advocate BroMenn Medical Center (ABMC)

December 2014

Priority Area: Obesity among individuals with diabetes.

Target Population: Low income adults who receive services from the Community Health Care Clinic.

Goal: Reducing obesity among adults with diabetes by improving diabetes self-management skills.

Performance Measures:

- Increase knowledge of diabetes self-management by 12.5%.
- Decrease body mass index (BMI) by a minimum of one from starting value (obtained prior to starting the diabetes education class) to value obtained at 6-month follow-up appointment.
- Decrease in HbA1c or stabilization of HbA1c from starting value obtained prior to attending diabetes education class.
- Reduction in body mass index of greater than one from starting value obtained prior to attending diabetes education class.

Objective #1: Offer diabetes education class to 20 patients of the Community Health Care Clinic by 2014.

Accomplishments:

- Eight patients of the Community Health Care Clinic have participated and completed the 4-week diabetes education class offered twice in 2013 and once in 2014.
- Of the patients that took both the pre- and post-survey in the diabetes self-management class, the average improvement was 25%.
- There was no change in BMI for any patients at their six-month follow-up appointment.
- At the six-month follow-up appointment, 33% of patients HbA1c decreased, 33% of patients HBA1c increased, and 33% of patients did not opt to retest.

Objective #2: Conduct two diabetes education classes in 2014 for patients at the Community Health Care Clinic.

Accomplishments:

 One diabetes education class was held in 2014 for patients at the Community Health Care Clinic. Due to the low number of participants in the diabetes education classes scheduled specifically for patients of the Community Health Care clinic, a second class was not held in 2014. To address this situation, patients of the clinic will be assessed by ABMC diabetes educators and these individuals will either receive one-to-one education or will be referred to existing group classes offered at ABMC.

Objective #3: Evaluate expansion of diabetes self-management program to include patients of Advocate BroMenn Medical Center's Family Health Care Clinic (low-income adults) into the diabetes education classes currently offered exclusively to the patients of the Community Health Care Clinic.

Accomplishments:

• As of May 2014, a process was developed integrating Family Health Care Clinic and Community Health Care Clinic patients into the ABMC classes.

Next Steps:

 Despite an identified need for diabetes self-management education for low-income patients in the community, participation was less than anticipated. In the future, regardless of income status, patients will be provided an opportunity to meet individually with diabetes educators or may attend group classes held at ABMC.

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