



Executive Summary:

While the rate of diabetes is an alarming 8 percent in the Fostoria area among the Caucasian population, the rate is a staggering 12 percent in the minority populations. Approximately 6 percent of the county population is African American, 8 percent is Hispanic, and 1 percent is comprised of other minorities.

It is well known that for diabetic persons to live a full, healthy life, they must self-manage their disease through regular monitoring and healthy habits. Most diabetic persons learn the skills of self-management through classes taught by health care professionals.

In spite of an easily accessible education program for diabetics, Fostoria Community Hospital was not reaching its higher at-risk minority population. A collaboration of hospital departments and community agencies devised a process to identify persons who have untreated diabetes by taking screening opportunities to community places, particularly churches. When at risk persons are identified, the trusted health care professionals direct them to appropriate medical follow-up.

Partnering with parish nurses within the local church congregations provided direct access for the screenings to identify persons at risk. Quick results testing equipment was purchased to enable on-site counseling by the parish nurses at the same time. Parish nurses counsel identified at-risk persons and refer them to medical follow-up. They also provide advice in seeking financial assistance and monitor the person's health care progress, as needed.

The program is only a few months old, but already the screenings are prompting desired results.

Organization Size: Critical Access Hospital – 25 beds

Program/Initiative Description:

Reaching diabetic persons in the minority population has evolved out of the strong diabetes treatment program at Fostoria Community Hospital. The hospital serves a community where the rate of diabetes is greater than the state of Ohio and the nation. In 1999 the hospital's diabetes education staff initiated a concerted effort to save the growing diabetic population. A diabetes self-management class was established for diabetics and family members with funding from the local United Way and direction from the newly formed Diabetes Advisory Council, a representative cross-section of hospital staff, physicians, community leaders, and persons with diabetes. Recognizing that the cost of the class was prohibiting some potential clients from participating, the Diabetes Advisory Council initiated an annual fundraiser to provide client scholarships. Additional monies from the Diabetes Fund, which is administered by the Fostoria Community Hospital Foundation, have been set aside to help newly diagnosed diabetics purchase supplies and medications while they become accustomed to their new blood sugar monitoring and management regime.

The community healthcare needs assessment in 2001 revealed that the rate of diabetes among the Caucasian population was 8 percent, while 12 percent of the minority populations suffered from diabetes. Approximately 6 percent of the county population is

African American, 8 percent is Hispanic, and 1 percent is comprised of other minorities. However, very few minority clients were taking advantage of the diabetes self-management education program. In response to this finding, the hospital created an innovative approach to reaching the underserved minority, as well as low-income populations.

The initiative's first step is to identify undiagnosed diabetics and noncompliant diabetics (persons who are not managing their disease) through a program of free screenings and education. By partnering with parish nurses in the Fostoria Area Health Ministry, the hospital increased its access to minority groups. It provides the equipment, supplies, and volunteer health care workers for cholesterol, blood pressure, and blood sugar screenings hosted at churches, including several churches with predominantly minority congregations. Quick, on-site screening results are possible with testing equipment and supplies purchased through the Diabetes Fund. The screening sessions are small, 10-15 people, in order to facilitate one-on-one counseling at the same time. Individuals identified with high blood sugar, high blood pressure, or high cholesterol readings are prompted by their parish nurse to seek further medical help. The parish nurse is in a unique position to advocate, support, and encourage individuals as they seek the treatment they need.

Similar health screenings are held at the annual community health fair, local corporate health fairs, and other events that bring health care workers to the targeted areas.

Establishment of Program/Initiative: Fall 2003

Racial or Ethnic Disparities Problem the Program/Initiative Was Designed to Address:

- A 2001 community needs assessment revealed that a diagnosis of diabetes was more common among individuals who have annual household incomes under \$25,000 (12 percent as compared to only 4 percent of those with incomes over \$25,000). Blacks and Hispanics were found to be represented in the lower economic population to a larger degree than Caucasians.
- Six percent of the county's residents were African American and 8 percent were Hispanic. The hospital perceived a need to reach these minority populations with diabetes and cholesterol screening, disease management education, and supplies.

Major Objectives:

- To identify previously undiagnosed diabetic patients and persons with high cholesterol levels and high blood pressure, targeting the African American and Hispanic populations that are at higher risk for the disease
- To assist persons in need with the education, equipment, and supplies to manage their diabetes

Significant Results:

- The program is just beginning, but the hospital has completed two screenings. Many of those screened had not been tested for diabetes previously.
- The hospital provided \$3,000 in scholarships in 2003 to diabetics in need of education, medication, or supplies to maintain their diabetes.
- The hospital purchased quick results screening equipment for blood sugar and cholesterol levels at a cost of \$2,000.

External Partners in the Program/Initiative:

- Diabetes Advisory Council
- Fostoria Community Hospital Foundation
- Fostoria Area Health Ministry, including a staff parish nurse serving most of the Hispanic population and the network of volunteer parish nurses

Limitations or Problems Encountered:

- Lack of diabetic literature that is culturally sensitive to minority populations
- Lack of information and materials in Spanish and with materials for lower reading levels

Estimated Cost of the Program, To Date:

- Screening equipment: \$2,000
- Blood sugar/cholesterol screenings: \$10/person, plus labor
- Educational courses: \$330/person (client scholarships cover the difference between the charge and reimbursement from third-party payers)
- Total scholarships for diabetic education, medical equipment, and supplies in 2003: \$3,000

Advice to Other Organizations: That May Want to Start a Similar Program: Reaching minority communities works well when the organization is involved with that community. Fostoria Community Hospital struggled to access the minority population until it connected with the parish nurse program. The parish nurses became the link needed between their congregational members and the hospital's diabetes program.

Financial assistance is often essential to involving newly diagnosed diabetics into a lifetime of disease self-management.

Contact Name: Laura Ritzler

Title: Director of Positive Lifestyles

Email address: laura.ritzler@promedica.org

Telephone: (419) 436-6688

Fax: (419) 436-6693