Health Extension for Diabetes: A Community-Clinical Partnership to Bridge Gaps in Diabetes Self-Management Support in South Carolina





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BACKGROUND

South Carolina (SC) ranks #6 for diabetes prevalence in the United States. Clemson Cooperative Extension and clinical partners have similar goals to help individuals in SC with diabetes improve their quality of life and thus partnered through the Health Extension for Diabetes program.

Health Extension for Diabetes (HED)

- 4-month evidence-based, practice tested, community
 Diabetes Self-Management Support (DSMS) program for individuals with type 1 or type 2 diabetes
- Facilitated by Diabetes Community Care Coordinators
 (Extension Agents) with support from clinical partners such as
 - Prisma Health-Upstate Diabetes Self-Management Education and Support (DSMES) Department
 - Medical University of South Carolina (MUSC)
 - Other clinical partners across the state
- Connects participants with community and clinical resources
- HED curriculum, updated annually, is based on the ADCES 7
 Self-Care behaviors, the Standards of Care in Diabetes,
 patient-centered care, and frequent interaction with
 participants

OBJECTIVES

Clinical and self-management integration improves the dissemination of information to a wider, more diverse group of people.

Bridges the gap of diabetes health information in underserved areas through:

- Clinical question referral process (Ask-It-Basket)
- Clinical expertise and facilitation on topics out of scope for Extension Agents
- Increased awareness of diabetes clinical services
- Community resource navigation
- Clinical referrals to community-based services

METHODS

Clemson Extension Agents - Diabetes Community Care Coordinators

- Clinical questions referral process (Ask-It-Basket)
- Promotion of and connection to clinical services in HED program sessions
 - Medical Nutrition Therapy (MNT)
 - Diabetes Self-Management Education (DSME)
- Identify and connect community and clinical resources
 - Other Extension programming: Know Diabetes by Heart, WalkSC, Practical Strength, Yoga for Every Body, Stirring Up Healthy Recipes, Hypertension Management Program, Expanded Food and Nutrition Education Program
 - Nutrition resources: Foodshare, food pantries, congregate meal sites for seniors, Meals on Wheels
 - Community and Social Services: SNAP, Medicaid, transportation resources, support groups, YMCA, housing resources

Clinical Partners

- Referrals into HED from MyChart, an electronic health record system (self-reported through online survey)
- Regular meetings with Extension/clinical team for updates, including hypoglycemia education, training, and protocol
- Yearly review of the Standards of Care in Diabetes and updates from clinical team
- Ask-it Basket answers
- Deliver MNT and DSME

RESULTS

Partnership Impact

716 referred individuals indicating interest in HED

1051 graduating HED participants educated about available clinical resources

66 individuals referred into DSMES/MNT

97 Practices referring into HED

Participant Demographics:

30.5% black, **54%** white, **8.5%** other

85.3% had a high school diploma or equivalent

52.5% had an income of greater than \$50k/ year

Program Results

n=1051

Average changes from pre – to post – program

BMI *DECREASED* from 34.3 to 33.7 (p<0.0001)

Weight *DECREASED* from 209.5 to 206.3 lbs. (p<0.0001)

Self-Efficacy Score (0-10)

INCREASED from 7.4 to 8.1

Diabetes Knowledge Score (0-100) *INCREASED* from 76.7 to 85.4 (p<0.0001)

CONCLUSION

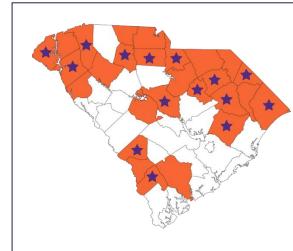
The community-clinical partnership of Health Extension for Diabetes

- Expands access to evidence-based diabetes selfmanagement education and support in underserved communities
- Streamlines referral process between clinical and community health programs to allow easy participation
- Increases knowledge and use of community resources and clinical education programs
- Improves diabetes self-management behaviors for people with diabetes in underserved, rural counties in South Carolina

FUTURE STEPS

Future steps include

- Utilize targeted approaches to reach broader demographics
- Analyze for statistical significance for results between in-person versus online delivery
- Continue to engage the Spanishspeaking community by delivering the program in Spanish
- Expand in-person HED to additional counties in SC



Orange - in-person & virtual programming available
White - virtual programming

+ Health Extension Agent office location

REFERENCES

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