



EBAN 3D Collaborative™
Defeating Diabetes Disparities

Team Name: Riverside

Date: Dec. 4, 2013

Aim

- Ultimate Goal: Learn effective approaches to educate our Somali population of patients with diabetes.
- Goal: To have patients at or below all five measures making their disease optimally controlled.
- Aim: Intervene through group classes learning from patients who are already at goal and teaching next steps for patients not yet at goal.



Plan-Do-Study-Act (PDSA) Cycles

PDSA #3 – Hold 2 Diabetic classes one month apart to educate and make plan of improvement for each attendee.

Test Cycle 1	Start Date: Nov. 19, 2013	End Date: Dec. 10, 2013
Plan	First class identify and invite pts both at goal and out of goal to obtain baseline numbers, do appropriate testing and educate on exercise, diet, and medication adherence. Second class review results and changes made, retest if appropriate, make personalized plans through use of separate stations.	
Do	Set up stations for blood pressure, diet, LDL for individualized plans.	
Study	Do group classes make a difference in overall adherence to plans to obtain/maintain individual diabetic goals.	
Act	Review individual numbers prior to first and second class to determine if there is improvement.	



Plan-Do-Study-Act (PDSA) Cycles

PDSA #3	
Objective	Provide education in a group setting to learn from each other while individualizing care to each patient to reach optimal control.
Prediction	50% of patients will improve in their goals by individual and group education/discussions
Population	Somali patients who are actively involved in their diabetes care by having at least one PCP visit within the past 12 months.



Next PDSA Cycle

- Describe...Review questionnaire results to determine next educational interventions based on what patients are telling us they need or will participate in.



How have you integrated your community partners into your improvement work?

- Our community partners have added valued expertise in organizing our questionnaires.
- Our community partners have added insight into what our patients cultural beliefs may be and how we work within these beliefs for success
- Our community partners have helped us understand what is and isn't in the community to support our patients in reaching their goals.



Successes

- The first class was very well attended with 14 Riverside patients.
- Clinic staff, along with community partners, gave us ideas on how to make our classes valuable to our patients along with what we needed to physically bring them together.
- Patients were very positive about the classes



Challenges

- Cost of the classes (food, interpreters, transportation)
- Staff time both in preparation/day
- Is it sustainable and if not, what we can do to make it valuable and continued participation

