



COMMUNITY FACT SHEET

Eau Claire Cooperative Health Centers

Columbia, SC

Program Overview

The mission of the Eau Claire Cooperative Health Centers, Inc. (ECCHC) is to provide comprehensive, high quality, compassionate medical care in the spirit of the Good Samaritan. The Cooperative is a federally qualified, community-based comprehensive medical safety net that provides access to primary healthcare services for a traditionally underserved population in Columbia, South Carolina and the Midlands.

The Eau Claire Cooperative Health Centers Project IMPACT: Diabetes team is comprised of 21 interdisciplinary members including pharmacists, pharmacy technicians, a physician, a nurse practitioner, certified medical assistants, nurses, podiatrist, AmeriCorps VISTAs, and an administrator. Patients with A1Cs greater than 7% are invited to participate in Project IMPACT in order to closely monitor and treat their diabetes through diabetes education, coordination of care between all engaged healthcare professionals, and promotion of holistic lifestyle changes. Patients were provided compensation for transportation and gift cards to incentivize completing the knowledge assessment and screenings.

Program Partners

I AM WOMAN is a partnership between ECCHC and Columbia Urban League created to address issues related to how the Social Determinants of Health impact health outcomes in minority populations and develop strategies to mitigate those effects. Richland Care is a hospital-based referral and diabetes education center with which ECCHC shares patients, services, and resources. ECCHC also partners with United Way of the Midlands through a chronic disease project and a program that engages AmeriCorps VISTA members to assist in identifying and supporting database management and administrative duties of Project IMPACT. Other partnering organizations include the Medical University of South Carolina, South University, and Palmetto health.

Community Champions: Chenise Nu, PharmD and Dean Slade

Patient Profile

In the ECCHC Project IMPACT Community, patients were drawn from clinics in Lexington County and outside of the primary internal medicine clinic location shared by the Cooperative Health Pharmacy. The income of the majority of ECCHC's patients is <150% of the federal poverty guideline and the local community is 85% African American. Most of the patients have at least an eighth-grade education. Patients were identified for the program through the electronic medical record by the pharmacy staff or through visits with their medical providers at the point of laboratory assessment.

Pharmacists' Role on the Collaborative Care Team

Since 2007, pharmacists have provided a wellness program that includes monthly education, monitoring, and coaching to patients with diabetes who are referred to them through the providers. Through Project IMPACT: Diabetes, pharmacists integrated the patient self-management credential (PSM) knowledge assessment into their care process. The results of the PSM credential knowledge assessment helped target education to individual patient needs. The pharmacist met with patients one-on-one for 20 to 30 minute sessions, led monthly diabetes education and monitoring sessions, and performed point-of-care lipid and cholesterol panels and HbA1c tests as necessary and discussed results with patients. Nurses provide wellness coaching on-site. Outcomes of visits and laboratory results are charted in the project database and data integrated into the EMR and shared with other members of the healthcare team. Members of the

healthcare team collaborate in decisions regarding therapy and any identified problems. The monthly sessions with pharmacists coincide with patients' diabetes medication refill visits, and patients enrolled in the program receive detailed information, education, and strategies related to their diabetes and participate in discussions and decisions about their healthcare goals and therapy.

Relevant Statistics – Community Level¹⁻³

- In 2010, South Carolina ranked as having the 5th highest age-adjusted prevalence of diabetes among adults in the U.S. (estimated at 10.0%, alongside Texas)¹
- When surveyed, 29.4% of patients in South Carolina with diabetes responded that they had their A1C checked by the physician one or less times in the past twelve months (N = 1524). Based on income, 38.4% of those making \$15,000 or less made this claim (n = 270)²
- When asked if they had ever taken a course or class in how to manage diabetes, 41.4% of people with diabetes surveyed in South Carolina responded, “No” (n=1550)³
- When patients with diabetes who make less than \$15,000 a year were surveyed, 44.7% of those in South Carolina responded that they are currently taking insulin to control their diabetes, and 35.5% of these patients admitted their doctor told them they have retinopathy (n = 337)^{4,5}
- In Columbia, SC the median household income for 2007-2011 was \$38,995⁶

Diabetes Epidemic at the National Level

Impact of Diabetes^{7,8}

- 25.8 million people, which is 8.3% of the U.S. population, have diabetes
 - 18.8 million people have been diagnosed with diabetes
 - 7 million people are undiagnosed
- 1.9 million people aged 20 years and older are newly diagnosed with diabetes each year
- The prevalence of diabetes in the United States increased by 128% from 1988 to 2008
- If present trends continue, 1 in 3 adults in America will have diabetes in 2050
- 79 million adults have pre-diabetes, which increases their risk of developing Type 2 diabetes later in life
- Diabetes is a major cause of heart disease and stroke
- Diabetes is the leading cause of kidney failure, non-traumatic lower-limb amputations, and new cases of blindness among adults in the United States
- Diabetes contributes to the death of 231,404 Americans each year

Cost of Diabetes⁸

- Total cost of diagnosed diabetes in the United States = \$245 billion per year
 - Direct medical costs = \$176 billion per year
 - Indirect costs (e.g., disability, reduced productivity) = \$69 billion per year
- Health care costs for a person with diabetes are 2.3 times higher than a person without diabetes
- 1 out of every 10 health care dollars is spent treating diabetes and its complications

References

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2. South Carolina Department of Health and Environmental Control. Behavioral Risk Factor Surveillance System Survey Results 2010 for South Carolina. Available at: <http://www.scdhec.gov/administration/phsis/biostatistics/brfss/BRFSS/2010/chkhemo3.html>. Accessed July 8, 2013.

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