



Licking Memorial Health Systems

# Taking Quality To Heart

...a community report on patient care quality



August, 2001 ~ Vol. 2, No. 8

Take a few minutes to read this month's quality report. You'll soon discover why Licking Memorial Hospital has been named one of the nation's 100 Top Hospitals for three consecutive years.

## Diabetes Care... How do we compare?

The Community Case Management (CCM) program at LMH provides free services to people in the community with diabetes. The program monitors quality indicators to ensure patients are getting the best care possible.

1. To monitor glucose levels, the American Diabetes Association recommends a person with diabetes have a blood test called a Hemoglobin A1C (HbA1C) every six months. The two most frequent reasons a diabetic may not get an HbA1C are that the test is not ordered or that the person did not go to the laboratory for the test.

|                                       | LMH 1999 <sup>1</sup> | LMH 2000 <sup>2</sup> | LMH 2001 <sup>3</sup> | LMH Goal |
|---------------------------------------|-----------------------|-----------------------|-----------------------|----------|
| % CCM diabetics who obtained an HbA1C | 46%                   | 93%                   | 92%                   | >90%     |

2. Each diabetic has a different treatment plan depending on the type and severity of the disease. For those who should have a decrease in their HbA1C, LMH measures if they met their goal. Other diabetics are monitored to stay within the normal limits.

|  | LMH 1999 <sup>1</sup> | LMH 2000 <sup>2</sup> | LMH 2001 <sup>3</sup> | LMH Goal |
|--|-----------------------|-----------------------|-----------------------|----------|
| % CCM diabetics with a decrease in HbA1C or within normal limits | 71%                   | 46%                   | 68%                   | >80%     |

3. The American Diabetes Association established the target HbA1C level for diabetics at seven percent or less.

|                                       | LMH 1999 <sup>1</sup> | LMH 2000 <sup>2</sup> | LMH 2001 <sup>3</sup> | LMH Goal |
|---------------------------------------|-----------------------|-----------------------|-----------------------|----------|
| % CCM diabetics with HbA1C 7% or less | 42%                   | 31.8%                 | 41%                   | >50%     |

Much of the care a diabetic receives is in the outpatient or physician office setting. LMHS participates in a national quality study called the Ohio Ambulatory Diabetes Project through which we can find areas for improvement based on baseline, remeasurement, state and national benchmarks.

4. The most critical indicators measured were that a diabetic patient: received an annual eye exam; received an annual HbA1C test; and had a complete lipid profile including a cholesterol check every year.

|                                       | LMH 1999 | LMH 2000 | State <sup>4</sup> |
|---------------------------------------|----------|----------|--------------------|
| % LMHS diabetics receiving eye exam   | N/A      | 79.2%    | 67.2%              |
| % LMHS diabetics having an HbA1C test | 90%      | 94%      | 71%                |
| % LMHS diabetics having lipid profile | 70%      | 79%      | 66%                |

1 Based on 134 diabetic patients in the CCM program December 31, 1999.

2 Based on 217 diabetic patients in the CCM program June 30, 2000.

3 Based on 214 diabetic patients in the CCM program June 30, 2001.

4 State data from Ohio Ambulatory Diabetes Project remeasurement of 2000 data.

### What do you need to know?

The diabetic education classes offered by LMH are three hours long and cover the basic information needed to begin self-managed care of diabetes.

The first half of the class is taught by a registered dietitian. "A diabetic diet is more flexible than one would think," explains Liz Kaercher, Registered Dietitian and Certified Diabetes Educator, "but one must understand how to plan the diet." The "how to" is explained in an easy, practical way so people can make changes in food choices or portions that will actually improve blood sugar immediately.

The second part of the class explains the medical care and medications for diabetes. This is taught by Ruth Coen, R.N., who is also a Certified Diabetes Educator. "Most people do not realize the importance of controlling their blood sugar," states Ruth. "They will feel better, have more energy and prevent the long term complications of diabetes."

Diabetes can lead to heart disease, stroke, high blood pressure, kidney disease, blindness, nerve damage and amputations of the feet and legs. Even if a person does not require medication to control his or her blood sugar, education about the disease is essential right from the beginning and is a necessary part of staying healthy. Diabetes is a self-managed disease. People with diabetes can control it; the diabetes does not have to control them.

In addition to the three-hour class, one-to-one appointments can be scheduled with the dietitian to create an individualized meal plan that will meet each person's own needs. Also, a one-to-one appointment is available with the nurse educator for additional personalized teaching.

Approximately 16 million people in the United States have diabetes, yet 5 million don't know it. The symptoms of diabetes include an increase in urination, thirst, blurred vision and fatigue. If you have these symptoms, or are interested in a referral for diabetic education, see your family physician.

### FAST FACTS

- Over 300 people attend LMH's diabetic class each year, with 50 class times offered.
- LMH dietitians saw over 1,000 people in one-to-one counseling classes last year.
- The American Diabetes Association recommends that all adults be screened for diabetes at least every three years.
- Approximately 15.7 million people, 5.9% of the U.S. population, have diabetes.
- According to the Centers for Disease Control, the medical costs for people with diabetes are \$44 billion each year.

### SUCCESS STORY

Managing diabetes through your physician office

Ask Bill Snyder how he discovered he had diabetes, and he'll tell you it all began with a toothache. He was visiting his dentist for a routine checkup when he noted that he had a sore spot in the gum over one tooth. His dentist advised treatment, but when the sore didn't go away after a few weeks, Bill was referred to a periodontist. His periodontist discovered periodontal disease, but was puzzled that Bill showed none of the routine symptoms. He asked Bill how long it had been since he had seen a doctor. When Bill admitted it had been more than 30 years, he was referred to a physician: Dr. Gerald Ehram of Licking Memorial Internal Medicine.

"I just hated the thought of going to a doctor," Bill explained. "So when I showed up for my physical, I actually told Dr. Ehram that. I told him I wouldn't be there if I had a choice. I'm not usually that abrupt — especially with someone I was just meeting for the first time. But Dr. Ehram said he understood. He said there were lots of people who didn't like the thought of doctors. He was so nice, I actually felt rather guilty for being brusque."

Dr. Ehram performed a complete physical. The results indicated adult onset diabetes. "There is a strong history of diabetes in my family, but I was still surprised with the diagnosis," Bill said. "At that time, I was exercising regularly — jogging in the morning and swimming in the afternoon — and I thought I was in the best shape of my life."

During that first year after the diagnosis, Dr. Ehram met with Bill every six weeks. He arranged for Bill to meet with a diabetic instructor and a nutritionist from the Community Case Management Department of Licking Memorial Hospital. He advised changes to Bill's diet and prescribed medication to keep his blood glucose levels in check.

"He was so helpful," Bill recalled. "He would always conclude every visit with an encouraging word, saying things like 'you're doing so well' or 'keep up the good work.' And when I eventually had to begin using insulin several years later, he was wonderful at helping me get over the fear of having to inject myself."

It's been about 15 years since Bill was first diagnosed as diabetic, and he claims his physical and mental well being — along with his relationship with Dr. Ehram — are just super. He now visits the office just once every four months because he is able to keep his diabetes so well in control. "But I feel so comfortable with Dr. Ehram, I don't hesitate to call if I have a concern," Bill stressed. "We have a wonderful relationship. He asks me about my family and my dog; he even remembers my dog's name. My friends can't get over the fact that my doctor is so intimately involved with a patient. And because Dr. Ehram shows how much he cares, I try very hard to exercise and eat right and do all the things I should do to keep my health in check. I don't want to let him down."

"I'll be 71 years old this year, and my family all lives in South Carolina," Bill shared. "I've thought from time to time about moving there to be closer to them in my later years. But I continue to stay in town... and one of my reasons is Dr. Ehram. I just don't want to leave quality healthcare."



Pictured from left to right: Bill Snyder, Dr. Gerald Ehram, and Rhonda Cochran, LPN

"He would always conclude every visit with an encouraging word."

- Bill Snyder

Visit [www.lmhealth.org](http://www.lmhealth.org) to review other LMHS quality report cards. Also, if you have a suggestion on how we can improve our care, please call our Performance Improvement Line, 348-4641.