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Nurse Led Community Health Worker Lay Leader Model

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Nurse Led Community Health Worker Lay Leader Model



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University of Kentucky Center of Excellence in Rural Health



Background

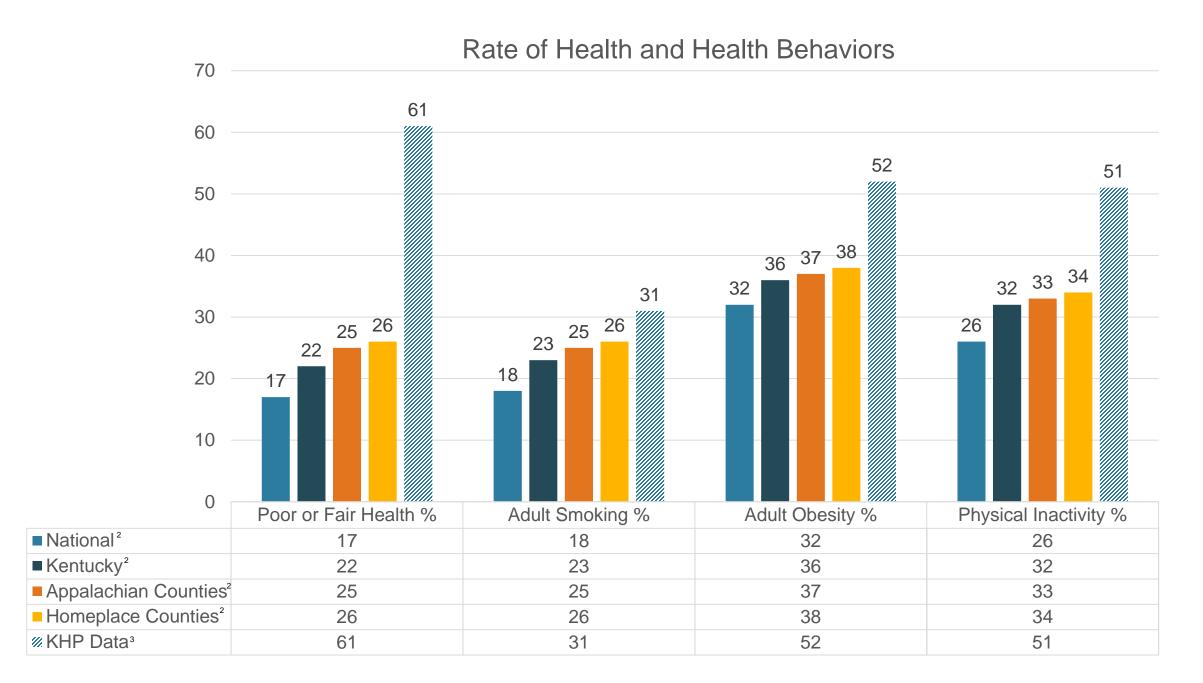
In America's Health Rankings 2018 Annual Report, Kentucky ranked 45 out of 50 in the nation's healthiest states, signifying the poor overall health of the state. Additional statistics show that rural areas of Kentucky, especially the Appalachian region, face some of the highest rates of health disparities in the state and nation. Associated social, environmental, and health risk factors in this population further complicate matters, resulting in a higher prevalence of chronic diseases.

Although chronic diseases can cause serious complications, most disease risk factors can be prevented or controlled. Evidence-based self-management education models, such as the Chronic Disease Self-Management Program (CDSMP), Diabetes Self-Management Program (DSMP), and Walk With Ease, may provide a solution to address the growing chronic disease epidemic. In these programs, participants receive self-management education for a variety of chronic diseases, including diabetes and arthritis, to improve and manage their health conditions.

Led and trained by registered nurses, community health workers (CHWs) incorporate these self-management programs into the communities they serve and provide a supportive role by interacting with participants before, during, and after each session to aid in successful completion rates and improved health outcomes. One such CHW program, Kentucky Homeplace, has been providing self-management education since its inception in 1994, and began integrating CDSMP, DSMP, and Walk With Ease into the community in 2015.

Barriers

- Residents of Appalachia are statistically poorer, less educated and less likely to have medical coverage than those in other parts of the state and nation.
- Most of Kentucky's 120 counties are designated as medically underserved areas.
- Barriers, especially for rural populations, include poverty, access to care and insurance, health literacy, transportation, and numerous other factors.



Kentucky Homeplace Model

Strategically located in Appalachia, the nationally recognized CHW initiative, Kentucky Homeplace, has emerged as a leader in reaching this underserved population. Since 1994, Kentucky Homeplace has linked hundreds of thousands of rural Kentuckians with medical, social, and environmental services. Kentucky Homeplace CHWs are trained to emphasize preventive care, health education, and disease self-management. The CHWs are skilled at recruiting and retaining participants in their programs. Much of the success of the CHWs is they are employed from the communities they live and have developed well-established connections

Funding for the program is a joint collaboration

in the community.

of the Kentucky Cabinet for Health and Family Services and the University of Kentucky and the Center of Excellence in Rural Health.

Evidence-based Self-management Education Models

Chronic Disease Self-Management Program⁴

Developed by researchers at Stanford University, CDSMP focuses on self-management education designed for adults with a variety of chronic health conditions.

- The program takes an active teaching approach to build participants' confidence in managing chronic health conditions.
- Two trained leaders conduct small group education workshops for six-weeks, meeting once a week for 2 ½ hours per session in a community setting.
- In these interactive workshops, participants learn about:
 - Setting goals and creating action plans
 - Techniques to address the physical and psychological issues related to their chronic
 - Improving communication with health providers
 - Exercise, nutrition, and medication usage.

Diabetes Self-Management Program⁵

This program provides the same workshop format as CDSMP to deliver diabetes selfmanagement education. The curriculum covers:

- Managing symptoms of diabetes
- Exercise, nutrition, and medication usage
- Communication and working with health care providers.

Walk With Ease⁶

The Arthritis Foundation Walk With Ease program is a self-management education program developed for adults with arthritis. Education on arthritis self-management and physical activity designed to reduce pain, increase physical activity, and improve health is provided in a structured six-week program. Classes are self-guided or completed in a community setting.



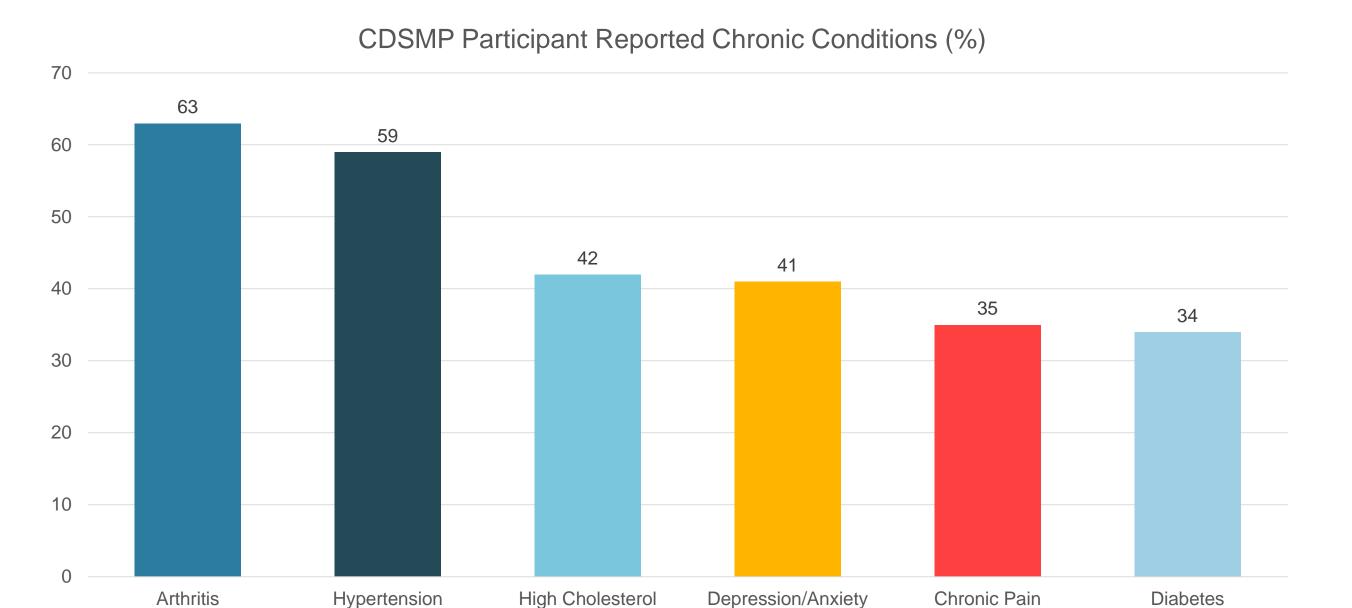
Photo: Chronic Disease Self-Management and Walk With Ease workshops were conducted throughout eastern Kentucky, including the one pictured here facilitated by Kentucky Homeplace CHWs Elizabeth Smith and Shirley Prater in Carter County at the Friendship House Chapel in

Process

- Training: Registered nurses were trained in the CDSMP, DSMP, and Walk With Ease models to provide leadership and training for the Kentucky Homeplace CHWs to incorporate these programs into the community.
- Referral Process: Kentucky Homeplace worked with community providers to develop a referral process to accept clients into CDSMP, DSMP, and Walk With Ease workshops.
- Workshops: Trained CHW lay leaders paired to deliver workshops in their communities throughout eastern Kentucky.
- Partnership: WellCare provided gas cards to remove the transportation barriers and allowed sharing of data for tracking A1C levels, hospital admissions and, emergency room visits.
- Outcomes: Program data was collected in a database and analyzed. A CDSMP Workshop Locator Map for Kentucky was created that showed upcoming self-management workshops.

Outcomes

- 778 individuals participated in CDSMP (8/12/2015-5/28/2018)⁷
- 373 signed informed consent⁷
- 284 (76.1%) completed the program; 70% males, 79% females⁷



"Not being able to read has always made things difficult. This class has helped me to understand how to take care of myself. I was given a CD of the Living a Healthy life audiobook and I love it and can understand things better."

Success **Stories**

"Learning how to read the labels and how to complete a meal plan was very helpful."

"I attended this class because I am a pre-diabetic and I have a grandmother and both parents who are diabetic. I felt like it could help me make better decisions and change my health. I have really enjoyed the class and I have learned a lot of information to put into practice and to share with my family".

Implementation Tips

- Partner with community organizations to combine resources and broaden your reach.
- Remove barriers to improve access to programs by modifying services and information, providing gas cards, and using convenient locations.
- Use trusted community members to recruit participants.
- Establish champion buy-in from the community.
- Be flexible when scheduling workshops by offering sessions at different times during the day and throughout the year.
- Be a passionate leader who brings energy, excitement, and positivity to the program.

References

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