CARES COOK COUNTY
DIABETES PREVENTION & MANAGEMENT

Swedish Hospital Success Story

2026

Approach

Since implementation of the integrated registered dietician (RD) with the Diabetes Self-Management Education and Support (DSMES) model, approximately 150 patients with chronic wounds have received nutrition-focused and diabetes self-management support services within the wound clinic setting. The majority of patients served were uninsured or publicly insured and experienced multiple barriers that negatively impacted wound healing and diabetes management. Preliminary outcomes from the first year of the initiative demonstrated promising improvements in patient engagement, glycemic management, healing outcomes, and healthcare utilization. Program outcomes following RD intervention are depicted below.

Program Outcome Data

- **76%** attended more than one RD visit
- **80%** experienced zero hospital admissions
- **81%** demonstrated decreased A1c levels
- **42%** experienced increased healing rates
- **39%** decreased hospital admissions
- **24%** completed 2+ A1c measures within 6 months
- **75%** decreased 30-day hospital readmissions
- **72%** reported receiving “great care”

Background

Chronic wounds and diabetic foot ulcers (DFUs) pose a significant burden on both patients and healthcare systems. Patients with diabetes-related wounds experience higher rates of infection, hospitalization, delayed healing, and lower extremity amputation. Thirty-day readmission rates for patients with diabetic foot ulcers range from 22–27%, compared to 8.5–13.5% for hospitalized patients overall. Nutrition and glycemic control are well-established factors influencing wound healing outcomes, yet access to registered dietitians (RDs) in outpatient wound care settings remains limited. A 2024 study found that 72% of wound care providers referred patients to a dietitian only once per year or never, while 25% reported never conducting nutrition assessments due to time constraints.

Patients receiving care at the Swedish Hospital Wound Care Center often face significant barriers, including food insecurity, limited insurance coverage, transportation challenges, medication affordability concerns, housing instability, and difficulty accessing specialized nutrition support. Recognizing these gaps, the wound care center implemented a practice innovation initiative integrating a wound care certified registered dietitian into the interdisciplinary wound care team and establishing the clinic as an official DSMES location.



Illinois Public Health Institute

Opportunity

This initiative addresses DSMES priorities through integration of nutrition and glycemic management into outpatient wound care services for high-risk patients with diabetes-related complications.

The Swedish Hospital Wound Care Center implemented an interdisciplinary care model integrating a wound care certified registered dietitian directly into routine wound clinic operations. Patients were seen by the RD in conjunction with their medical wound care appointments, allowing nutrition assessment, DSMES interventions, and glycemic management support to occur as part of standard wound care rather than through external referrals.

The interdisciplinary team included wound care physicians, nurses, endocrinology providers, primary care providers, and durable medical equipment partners such as Adapt Health. Nutrition interventions focused on optimizing protein intake, identifying micronutrient deficiencies, supporting glycemic control, and addressing barriers to diabetes self-management. Patients also received education on continuous glucose monitoring (CGM) and provided access to FreeStyle Libre and Dexcom devices.

Frequent follow-up visits allowed the care team to provide ongoing coaching, reinforce behavior changes, and address social barriers affecting wound healing outcomes. Patients were connected with food assistance resources, medication affordability coupons, CGM support, and individualized nutrition education tailored to their wound type, diabetes status, and social needs. Embedding the RD within the wound care center eliminated a major access barrier for patients who otherwise may not have pursued outpatient nutrition counseling independently.

Support

CDC support strengthened implementation of the DSMES initiative through funding support for DSMES services, educational resources, community partnership support, and peer connections.

Next Steps

The Swedish Hospital Wound Care Center plans to continue expanding the integrated RD and DSMES model to improve outcomes for patients with chronic wounds and diabetes-related complications. Future efforts include continued outcome tracking, strengthening interdisciplinary referral pathways, expanding CGM access, and increasing support for patients experiencing food insecurity and other barriers.

The program also aims to further evaluate long-term impacts on wound healing rates, hospital readmissions, glycemic control, and patient quality of life to strengthen the evidence supporting scalable integration of registered dietitians into outpatient wound care settings. This practice innovation demonstrated that integrating nutrition expertise directly into outpatient wound care can improve patient satisfaction, reduce barriers to care, and support better clinical outcomes. The initiative highlights the importance of addressing both medical and social factors affecting diabetes management and wound healing.

*CARES Cook County is a Centers for Disease Control and Prevention (CDC)-funded initiative convened by the Illinois Public Health Institute (IPHI) in partnership with healthcare and community-based partners across Cook County.