

## The Connecticut Diabetes Prevention and Control State Plan Updates

*November 2008*

On October 2, 2007 the Department of Public Health (DPH), Diabetes Prevention and Control Program, released the Connecticut Diabetes Prevention and Control Plan for 2007- 2012 (CDPCP). This plan represents the insight of over seventy partners from around the state representing a variety of expertise. Each participating partner provided input into one or more workgroups that included: Diabetes Prevention, Disease Management, Access and Policy, Education and Awareness and Surveillance. Each group developed goals, objectives and strategies to address diabetes in Connecticut.

This update is designed to inform diabetes stakeholders in Connecticut of the progress made on these goals, objectives and strategies to date. Updates are reported from both DPH projects, as well as from initiatives of community partners in the field. Partners were asked to report on the progress of meeting the objectives in the CDPCP through a mail survey in August 2008. The updates represent responses from the survey. There may be other initiatives taking place.

The DPH and our partners have made significant achievements on limited resources. To enable the implementation of the Plan objectives through enhanced funding, the DPH DPCP provided a grant writing technical assistance program to nine community based organizations. As a result of this program, to date, New Milford Hospital has received a \$50,000 grant from the Connecticut Community Foundation as well as a \$25,000 grant from the Foundation for Community Health to address diabetes prevention. In addition, the DPH provided a letter of support to St Francis Physician Hospital Organization who was successful in obtaining \$194,058 from the Connecticut Health Foundation. Other letters of support from the DPH were provided to the Community Health Center Association of Connecticut, Stamford Hospital, Fairhaven Community Health Center and the Prevention Research Center. Results of these grant applications are pending. The DPH also provided letters of support to two organizations that received large grants and as a result are currently providing resources to address diabetes in Connecticut. They are the Center for Eliminating Health Disparities in Latinos, which was awarded an \$8.2 million National Institute of Health grant, and the Khmer Health Advocates, which was awarded an \$850,000 Racial and Ethnic Approaches to Community Health /CDC grant. To address diabetes health disparities, the Connecticut Health Foundation awarded a total of \$1.3 million to four community health centers (Community Health Center Inc., Community Health Services, StayWell Healthcare, Inc., and Fair Haven Community Health Clinic). The DPH is planning a second phase of grant writing guidance to assist organizations within the state to seek funding for programs that carry out the implementation activities of the plan.

Within the Chronic Diseases Section at DPH, coordination and linkages are made with the programs developing comprehensive plans for stroke and heart disease. The Stroke Plan identifies diabetes as one of the risk factors for stroke, and addresses stroke prevention (and treatment) in their recommendations. The Diabetes Advisory Group and the DPH are proud to provide this update on progress made thus far.

The following pages highlight *achievements and updates* under the appropriate objective for each work group. Please note that only the objectives that had specific achievements or updates are listed below.

## Diabetes Prevention

**By 2012, reduce by .5% the prevalence of type 2 diabetes by preventing or delaying the progression of pre-diabetes to diabetes. This is being achieved by;**

Increasing the awareness of providers and people with pre-diabetes about the potential to prevent diabetes onset through lifestyle change, and by developing and promoting pre-diabetes screening programs accessible to all at risk Connecticut residents with referrals to health care providers as appropriate

- **Update:** In March 2008, in concert with the ADA Diabetes Alert Day, the DPH DPCP conducted a diabetes awareness campaign targeting African Americans in Hartford, Bridgeport and New Haven. This radio and print campaign advertised availability of diabetes screenings being offered in two Community Health Centers in these cities. In addition, one television and three radio interviews were conducted.

Delivering cost-effective pre-diabetes interventions as efficiently as possible

- **Updates:** The Ethel Donaghue Center for Translating Research into Practice and Policy at the University of Connecticut Health Center received a \$3.1 million grant to implement diabetes prevention programs in Hartford churches.
- The Yale Griffin Prevention Research Center has implemented and will evaluate the Nutrition Detectives and ABC for Fitness for diabetes prevention in New Haven schools

Changing Connecticut's health system to support healthy lifestyles for residents of all ages, and engaging community organizations to ensure that messages about lifestyle modification are delivered in culturally relevant and positive ways

- **Update:** The DPCP is working with Concerns Citizens for Humanity, the African American Affairs Commission and the American Diabetes Association to develop and provide posters targeted to African Americans with diabetes and diabetes prevention messages to beauty salons, barber shops, churches and community based organizations.

Supporting interventions promoted by other programs, such as the CT DPH Obesity Program, that include modifications to school lunch programs to provide healthy school nutrition environments.

- **Update:** The CT State Department of Education (SDE) released school wellness policy reports for all Connecticut school districts participating in the U.S. Department of Agriculture's (USDA) child nutrition programs. The report cards provide an overall score and rate the comprehensiveness and strength of each district policy in nutrition education; school meals; other

school food and beverages; physical education; physical activity; communication and promotion; and evaluation. The scores were calculated using a measurement tool developed by the Rudd Center for Food Policy & Obesity at Yale University. The tool and report cards are available on the SDE website.

## Disease Management

**By 2012, increase by 50% the number of Connecticut physicians and other health care providers who use ADA and other evidence-based guidelines to diagnose and monitor pre-diabetes and diabetes as measured by the number of physicians recognized by the ADA. This is being achieved by;**

Promoting the adoption and integration of ADA and other evidence-based guidelines into clinical practice to support early diabetes diagnosis and use of ABC (A1c, blood pressure, cholesterol) values

- **Updates:** Data from one large primary care physician organization reported the following improvements from March 2008- July 2008: A1c < 7: 14%-42%, LDL testing: 29% - 68%, Dilated retinal exam: 5%- 15% (note: there are often reporting difficulties with this exam), Depression screening: 5%-20%
- Qualidigm has worked with forty primary care providers to improve preventive service utilization among Medicare beneficiaries with a goal to increase the use of electronic medical records and registries, and to create performance data reports for diabetes management.
- The Yale Health Plan (YHP) maintains a diabetes registry which reports key indicators for each patient and in aggregate including A1c, LDL cholesterol, blood pressure, foot exams, eye exams, immunizations and smoking status. The YHP reports overall compliance for these and HEDIS metrics. They are currently recruiting physicians to participate in the National Committee for Quality Assurance Diabetes Physician Recognition (NCQA DPR) Program.
- St Francis PHO has over thirty physicians that have achieved NCQA DPR.

**By 2012, improve patient care by increasing the number of health care providers using electronic medical records or disease registries by 10% to establish a statewide health data exchange, increase outreach, and improve communication among providers. This is being accomplished by;**

Developing effective communication vehicles to demonstrate the value of reporting clinical outcomes to providers using evidenced based literature, peer-to-peer outreach and other means, and showing providers how such clinical outcomes, reporting through incentive programs, or other vehicles can be valuable for their patients, their practices and others.

- **Update:** A Diabetes Disease Management Forum was held on March 25, 2008. This program featured three physicians who actively use disease management in their practices. Forty people attended. Follow-up survey of eight attendees indicated one group implemented a practice change and four others are considering practice changes.

**Objective: By 2012, increase by 5% the percentage of adults age 18 and older who are conducting comprehensive self-management to control their disease.**

**This is being achieved by;**

Assessing current disparities and creating plans to remove identified disparities through culturally-focused diabetes care, and involving community leaders in creating community health initiatives

- **Update:** Working with the Department of Social Services, Department of Aging, using a grant from the National Council on Aging, the DPCP has been working with various community based organizations to implement the Stanford Chronic Disease Self Management program
- The Center for Eliminating Health Disparities in Latinos, the Khmer Advocates, and four Connecticut community health centers will be conducting approaches to achieve change in systems, communities, and broader environmental contexts within which individuals and groups interact to eliminate racial and ethnic health disparities.

Training health care professionals, para-professionals and lay health workers in the community health setting on diabetes prevention, care and management

- **Update:** The DPCP, through a contract with Southern Connecticut State University (SCSU), has developed and is implementing a medical assistant training program on diabetes. To date, four (4) programs have been conducted

Creating a standard self-management education program that is simple and user friendly and that involves a program for health care literacy that is language appropriate and culturally sensitive

- **Update:** The DPCP, through a contract with the SCSU, partnered to develop a diabetes self-management curriculum for patients with diabetes. It is targeted to patients who receive diabetes care at Community Health Centers.

Fostering patient responsibility for diabetes care by adopting and promoting self-management education programs that engage the patient, and provide patient financial incentives and personalized nutrition guides and exercise plans

- **Update:** Note: there are currently 26 ADA Recognized Education Programs in Connecticut

**Objective: By 2012, increase by 10% the proportion of health care providers who adopt a uniform system of reporting, including the coding of diabetes diagnoses. This is being accomplished by;**

Promoting and supporting standardized coding and reporting tools and processes for providers, and promoting linkage of diagnosis plans with education plans

- **Update:** “Sweet Mamas” is a pilot group prenatal care program for gestational diabetes being conducted by Yale New Haven Hospital.

## Education and Awareness

**By 2012, increase by 5%, the proportion of people with diabetes participating in diabetes self-management education programs in order to learn about controlling their diabetes.**

Make available training curricula options for patient education.

- **Updates:** Included in the DPH contract with SCSU is a project to develop a curriculum for teaching patients with diabetes. It is targeted to patients at Community Health Centers
- Healthy Interactions and the ADA through sponsorship from Merck Journey for Control, has provided 12 training sessions to 174 health care professionals and paraprofessionals on the Diabetes Conversation Maps
- The DPCP provided diabetes education materials to eight community health centers
- Khmer Health Advocates has developed a diabetes curriculum entitled “Eat-Sleep-Walk” for use in the Cambodian community.

Create partnerships with hospitals, CHCs, volunteer health organizations, CADH, AHA, and local health departments to ensure staff has information relevant to care through education resources added to organizational newsletters (hospitals, CT DPH, etc.) and Web sites.

- **Updates:** The DPCP publishes and distributes a quarterly newsletter to over 300 partners which includes updates from the DPH as well as from our partners
- The ADA has provided Diabetes Resource Manuals to eighteen health care providers

Train non-CDEs, including school nurses, medical assistants, certified nurse aides, peer-to-peer educators, faith organization members, senior center staff, local health department educators, and lay persons as referral resources, to augment traditional education programs.

- **Updates:** The DPCP, through a contract with Southern Connecticut State University, (SCSU), has developed and is implementing a medical assistant training program on diabetes. To date, six programs have been conducted.

- The DPH, in conjunction with the Department of Social Services was awarded an Administration on Aging grant for \$275,000 for three years to implement the Stanford Chronic Disease Self Management program to seniors with diabetes (and other chronic diseases). To date eight programs have been conducted.
- The ADA conducts the Family Resource Network to families with children
- The Juvenile Diabetes Research Foundation hosts support groups in various locations in the state, the family mentor network, the Bag of Hope program for newly diagnosed children and various family events.
- Novo Nordisk is providing a program entitled "Changing Life with Diabetes" whereby Certified Diabetes Educators work directly with physician offices to develop and implement practices that may improve diabetes management through education to office staff on standards of care and providing non branded toolkits of patient resources.

Engage HMOs to standardize access to education programs by taking advantage of Connecticut law that requires diabetes education for persons with diabetes, and partnering with grocery stores, libraries, senior centers, town halls, and other public places to make diabetes, nutrition, and general health information available.

- **Updates:** The First Cathedral in Bloomfield conducted a diabetes/cancer health fair on Oct 20, 2007 which attracted an attendance of over 1000 primarily African Americans.
- The DPCP provides diabetes and diabetes prevention information at a variety of venues for health fairs conducted across the state.
- The Yale Griffin Prevention Research Center has created "Photovoice": A Tool for Community Empowerment that focuses on diabetes in the African American community to engage community residents and legislators.
- The DPCP worked with the Genomics Department at DPH to create and make available information on family health history including a section on diabetes. These are being distributed in a variety of public places.
- The ADA conducted its annual Diabetes EXPO April 19, 2008. 3092 people attended to receive information on diabetes products, attend educational sessions, receive a variety of screenings and view demonstrations
- East Hartford, Eastern Shore, Central CT and New Haven Health departments conducted free diabetes education classes for residents.

**By 2012, increase by 10% the number of providers who participate in continuing education programs focused on diabetes. This is being achieved through;**

Expanding physician participation in professional education programs by encouraging insurers and pharmaceutical companies to offer scholarships for doctors to attend the national scientific sessions or diabetes post graduate conferences and providing materials on these

programs to physicians' office staff. Conducting ongoing professional education with a curriculum that incorporates best practices and prevention (e.g., Grand Rounds, CMEs, etc.) for physicians/providers involved in providing diabetes services.

- **Updates:** A Diabetes Review and Update course was provided by the DPCP in March 2008. This program highlights ADA and other evidence based guidelines. 112 health care professionals attended. A second program to address the waiting list was held on Oct 7, 2008 and another 119 people attended
- Through a grant from the National Association of Chronic Disease Directors, the DPCP conducted a "Diabetes and Depression" program for health care providers. Ninety eight health care professionals participated.
- The ADA conducts an annual Diabetes Symposium for healthcare professionals as well as an annual Endocrinology Seminar.
- Danbury Hospital offers an annual diabetes education day for professionals
- Conversation Map trainings have been conducted throughout the state by Healthy Interactions (see description above under training curriculum)

Engaging hospital and clinic administrators to foster mentoring or peer education to change physician behavior and to support the increased number of, and enrollment in, patient education programs; engage medical directors from MCOs and PHOs to encourage their members to receive regular diabetes education.

- **Update:** The DPCP has established a contract with the Joslin Diabetes Center affiliate at the Hospital of Central Connecticut to provide a mentorship program to primary care providers

**By 2012, improve public awareness of the impact of diabetes by increasing by 10% the number of partnerships with community organizations (i.e., schools, libraries, media, town halls, and other public places). This is being achieved by;**

Engaging schools, libraries, senior centers, town halls and other public places, workplaces, faith-based and community-based organizations to share information on the risks, burden, and impact of diabetes, and on the availability of screenings

- **Updates:** The DPCP has developed a diabetes awareness poster targeting African Americans to be distributed to beauty salons and barber shops in New Haven, Hartford and Bridgeport.
- The ADA has provided two Valupak home mailing inserts to 120,000 homes with information on free diabetes alert test
- The Area Health Education Center's Migrant Farm Worker Clinic has participated in 31 mobile health clinics to provide over 400 blood pressure and glucose screenings using high school and college students
- The University of CT Urban Service Track has supported community Kidney Early Evaluation Program screenings sponsored by the National Kidney Foundation of CT.

- The Hispanic Health Council in conjunction with the Hartford Public Library provided free Spanish Diabetes Workshops.
- Norwalk hospital provided a public service announcement on WEBE 108 called "A Medical Minute by Norwalk Hospital" that airs during commuter hours. It covers: What diabetes is, signs and symptoms, risk factors, and information on education and working with a health care provider to control diabetes.
- During Diabetes Awareness month, Norwalk Hospital conducted and aired a program called, "A prescription for health" on Star99.9 radio station. The 3 part diabetes informational interview sessions covered, 1) what is diabetes, risk factors signs and symptoms; 2) Nutrition and diabetes; and 3) complications related to uncontrolled diabetes.
- Norwalk Hospital conducted a Health Talk TV show on cable TV aired diabetes; transition from oral medication to insulin for non-health care providers.

Training non-CDEs to provide accurate information on signs and symptoms of diabetes, and to refer people to formal education programs; develop a proficiency measure for community and peer diabetes health educators.

- **Update:** The DPCP, through a contract with Southern Connecticut State University, (SCSU), has developed and is implementing a medical assistant training program on diabetes. To date, four programs have been conducted.

Launching an information campaign drawing on partnerships, existing programs, and national campaigns to highlight the rapid rise in diabetes diagnoses; connect with a public figure to promote the message.

- **Updates:** The DPCP conducted diabetes public awareness campaign consisted of print ads as well as two radio and one television interview to high light diabetes alert in March 2008
- The DPCP has partnered with Dlife TV to provide commercial free past episodes of Dlife to 20 cable TV stations

Engage community organizations to ensure that messages about lifestyle modification are delivered in culturally relevant and positive ways.

- **Update:** Khmer Health Advocates (KHA), a Connecticut-based organization was awarded \$850,000 from the Centers for Disease Control and Prevention (CDC) to eliminate racial and ethnic health disparities among Cambodians in CT and the US.

**Access and Policy:**

**By 2012, increase by 5% the proportion of people who receive comprehensive diabetes care, i.e., diabetes preventive care, treatment, supplies, equipment, medication, education and medical nutrition therapy.**

Demonstrate the cost-effectiveness of diabetes education programs and promote a partnership among CT DPH, private groups, and public groups to implement universal diabetes education.

- **Updates:** The Yale Griffin PRC is evaluating four Community Health Center diabetes projects funded by the Connecticut Health Foundation at Fairhaven, Community Health Services, Community Health Center Inc and Stay Well.
- Community Health Centers across the state are providing a variety of services to thousands of patients with diabetes. These include patient education classes, staff education and tracking of measures via electronic medical records or registries.

Engage the state legislature to appropriate funds for pilot programs to spread the message about diabetes, both how to prevent it, and how to treat it, and securing commitment of the health care delivery system to the Diabetes Bill of Rights, and expand the definition of those covered under the Diabetes Bill of Rights.

- **Update:** The office of the Health Care Advocate assisted thirty five people with diabetes in the filing of complaints and appeals

**By 2012, increase by 5% the number of diabetes education services and disease management supports for people with diabetes. This is being achieved by;**

Assessing diabetes public health infrastructure to determine system gaps and develop policies that encourage the development of strong, efficient networks of providers by engaging legislators and insurers to make them aware of the barriers that exist to proper care

Developing improved capacity to address the behavioral causes of poor diabetes patient outcomes, including defining and addressing reimbursement issues that may inhibit access to psychologists' services

Addressing shortages of specialists with focus on diabetes by expanding the number of nurse practitioners and physician assistants that specialize in diabetes care through educational incentives and policy development to support creation of teams of connected diabetes professionals, and expanding the role of licensed health care professionals to provide more diabetes care including more frequent follow-up

- **Update:** The DPCP, through a contract with Southern Connecticut State University (SCSU), has developed and is implementing a medical assistant training program on diabetes. To date, four programs have been conducted.
- Norwalk Hospital Diabetes Education program partnered with Norwalk Health Department to offer a support lecture series at Norwalk City Hall, and

presented by Norwalk Hospitals Certified Diabetes Educators. The goal is to offer 4-6 lectures per year.

## Surveillance

**By 2012, increase by 5% the number of hits to the diabetes surveillance Web page as a means of increasing accessibility to the diabetes prevalence, morbidity and mortality data. This is being achieved by;**

Developing partnerships with large centers, registries, community-based organizations, CHCs, occupational health services, and use academia to assist in research and data collection projects, Identifying other data sources and data-collecting agencies to meet with state planning groups to determine how best to create data sharing networks,

Providing technical assistance on how to collect data to organizations that provide diabetes services, providing resources to community-based organizations to gather data about diabetes services, and conducting surveillance of priority subpopulations, as limited resources allow, and make information resources available to non-DPH organizations as appropriate.

- **Update:** The CT DPH Health Information Systems and Reporting Section has produced a Gestational Diabetes (GDM) Issues Brief which reports the prevalence of GDM for the first time (4%).

Disseminate available diabetes surveillance data to the general public through the CT DPH Web site and other appropriate venues.

- **Update:** DPH Website hits for surveillance increased from 200 (1/08) to 380 (7/08) and from 48 in 1/08 for the Diabetes Burden Document to 54 in 7/08