How Diabetes Education & the 7 AADE Self-Care Behaviors are Delivered in Community Programs?

Presentation to: Healthcare/Public Health
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Georgia Diabetes Prevention and Control Program

Mission
Protecting and preserving the eyes, hearts, kidneys and feet of Georgians living well with diabetes, prediabetes, and gestational diabetes.

Vision
Georgians living well, free of diabetes and its complications, with increased access to quality-oriented diabetes care and healthier options where they live, work, play and learn.
Figure 1. Prevalence of Formal Diabetes Education among Adult with Diabetes by Demographic and Healthcare Coverage Status, Georgia, 2012

*Sample Size too small to produce reliable estimates
^Non-Hispanic

Data Source: Behavioral Risk Factor Surveillance System (2012)
Essential Services of Public Health (3)
Inform, Educate, and Empower People About Health Issues

&
Essential Services of Public Health (7)
Link People to Needed Personal Health Services and Assure the Provision of Healthcare (When Otherwise Unavailable)
Opportunity: Increase DSME Program Access

Prevalence of Diabetes among Augusta Adults by County, 2008-2010

Prevalence of Diabetes among Waycross Adults by County, 2008-2010

Data Source: The Centers for Disease Control and Prevention:

We Protect Lives.
Opportunity:
Increase DSME Program Access

Prevalence of Diabetes among Macon Adults by County, 2008-2010

Prevalence of Diabetes among Athens Adults by County, 2008-2010

Data Source: The Centers for Disease Control and Prevention:
http://www.cdc.gov/ncidod/dpd/health/diabetes/prevalence.htm#macon
http://www.cdc.gov/ncidod/dpd/health/diabetes/prevalence.htm#athens

We Protect Lives.
Opportunity:
Increase DSME Program Access

Prevalence of Diabetes among Dalton Adults by County, 2008-2010

Prevalence of Diabetes among Rome PHD Adults by County, 2008-2010

Data Source: The Centers for Disease Control and Prevention:

We Protect Lives.
Expanded Chronic Care Model

Elimination of health disparities related to diabetes prevalence, disability, morbidity and mortality.
Increase the proportion of persons with diagnosed diabetes who receive formal diabetes education.
Relevant Healthy People 2020 Objectives: Diabetes (D)

D (Diabetes)-5.1
Reduce the proportion of persons with diabetes (with an A1c value greater than 9 percent).

D (Diabetes)-11
Increase the proportion of adults with diabetes who have a glycosylated hemoglobin measurement at least twice a year.

D (Diabetes)-13
Increase the proportion of adults with diabetes who perform self-blood glucose-monitoring at least once daily.

Relevant Healthy People 2020 Objectives: Diabetes (D)

D (Diabetes)-6
Improve lipid control among persons with diagnosed diabetes.

D (Diabetes)-7
Increase the proportion of persons with diagnosed diabetes whose blood pressure is under control.

D (Diabetes)-9
Increase the proportion of adults with diabetes who have at least an annual foot examination.

D (Diabetes)-10
Increase the proportion of adults with diabetes who have an annual dilated eye examination.

D (Diabetes)-12
Increase the proportion of persons with diagnosed diabetes who obtain an annual urinary microalbumin measurement.

Teachable Moments: Identifying Additional Opportunities for Patient Engagement

Every Physician Office Visit
- Family History-Medical
- Reduce Lifestyle Risk Factors
- Patient History-Medical
- Review Plan of Care (POC) Goals

Diabetes Diagnosis
- Maintain Recommended Testing
- Assess Medication Compliance
- Manage Co-morbid Conditions
- Assess for Tx & Referral Challenges

Every Physician Office Visit
Teachable Moments: Identifying Additional Opportunities for Patient Engagement

**Who?**
- Frequent Emergency Room Visits/Hospital Admissions
- Episodes of visual, kidney foot problems, or high blood pressure
- Experience difficulty adjusting to recommended nutritional intake

**When?**
- Glucose levels continue to fluctuate
- Difficulty adjusting to medication schedule or adherence with multiple medications
- Challenges with meeting plan of care or treatment goals

**Where?**
- Recently discharged from hospital due to diabetes complications
- New to insulin therapy regimen and experiencing challenges
- Difficulty recording or remembering when to check glucose levels in log book
Upcoming Opportunities for Georgia’s Healthcare & Public Health Professionals
Georgia Diabetes Self-Management Education (DSME) Learning & Sustainability Network
Scholarships:

Certified Diabetes Educators (CDE)- Exam Fee for clinicians (including pharmacists)

Medication Therapy Management (MTM) Certificate Training Program for Registered Pharmacists
Diabetes is a serious and costly disease that affects both genders and crosses cultural, sociodemographic, and geographical boundaries.

In 2012, approximately 9.9%, or 734,800, Georgia adults were diagnosed with diabetes.

2013 Diabetes Self-Management Report

Diabetes-Related Complications among Older Adults

Nationally, older adults with diabetes have the highest rates of major lower-extremity amputation, visual impairment, end-stage renal (kidney) disease and heart conditions such as myocardial infarction (MI) of any age group. Normal aging and diabetes, and conditions such as functional and cognitive impairments that impair function are associated with a higher risk of falls and fractures. A potential cause of functional impairment in diabetes may include interaction between coexisting medical conditions, peripheral neuropathy, vision and hearing difficulty, and gait (walking) and balance problems.

Moreover, peripheral neuropathy, present in 50–70% of older patients with diabetes, increases the risk of postural instability, balance problems, and muscle atrophy, limiting physical activity and increasing the risk of falls. Older adults are at high risk for the development of type 2 diabetes due to the combined effects of increasing insulin resistance and other impaired functions associated with aging.
2014 Georgia Diabetes Community Resource Guide

Featuring Diabetes and Chronic Disease Self-Management Education Programs, Care and Support Resources For Georgians with Diabetes, Prediabetes and Gestational Diabetes Mellitus (GDM)

Diabetes, Prediabetes and Gestational Diabetes in Georgia

This Georgia Diabetes Community Resource guide provides a general listing of services and resources for Georgians diagnosed with diabetes, prediabetes (also known as borderline diabetes) or gestational diabetes mellitus (GDM), their loved ones as well as healthcare and public health professionals providing care and support to them.

Prepared by: Georgia Diabetes Prevention and Control Program

Returning To The Tradition of Healthier Living
Learn More..Move More..Eat Healthy
For Professionals: AADE Accredited Diabetes Self-Management Education (DSME) Programs
http://www.diabeteseducator.org/ProfessionalResources/accred/

For Professionals: American Diabetes Association (ADA) Diabetes Education Recognition Programs
Contact Information

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Georgia Diabetes Prevention and Control Program
2014 Georgia Diabetes Community Resource Guide
2013 Georgia Diabetes Self-Management Report and other reports
Diabetes Prevention and Management Resources
http://dph.georgia.gov/