



Engaging Health Care Providers to Scale and Sustain the National Diabetes Prevention Program

In 2014, with assistance from the Prevention and Public Health Fund, the Centers for Disease Control and Prevention (CDC) launched the “State and Local Public Health Actions to Prevent Obesity, Diabetes, and Heart Disease and Stroke” funding program (DP14-1422). This program awarded states and locals the opportunity to focus on efforts to support healthy lifestyles in high-risk communities that are more susceptible to developing diabetes and heart disease. States and locals were tasked with the implementation of evidence-based engagement strategies, including the National Diabetes Prevention Program (NDPP). The CDC-led program is a partnership of public and private organizations working to reduce the growing problem of prediabetes and type 2 diabetes. The partners work to make it easier for people with prediabetes to participate in evidence-based, affordable, and high-quality lifestyle change programs, aimed at reducing their risk of type 2 diabetes and improving their overall health.

Since January 2016, the National Association of County and City Health Officials (NACCHO) has worked with the CDC to convene a nationwide community of practice (CoP) consisting of 100 local health departments (LHDs), community-based organizations (CBOs), and states, to provide support for engaging Health Care Providers (HCPs) in local-level implementation of the NDPP. As part of the NDPP Local Sub-Awardee Community of Practice project, NACCHO gathered details from three CoPs regarding their progress in scaling and sustaining the project. Each of the stories will feature best practices from the three CoP local health departments that have worked with CBOs and Healthcare Providers, including physicians, optometrists, dentists, nurses, pharmacists and others to integrate the NDPP into clinical and community systems of care.

Salt Lake County Health Department Success Story

In August of 2015, the Salt Lake County Health Department announced via news release that they were opening participation for the National Diabetes Prevention Program, which will be a subprogram in its Chronic Disease Prevention department. The news release cited the fact that 33% of “Utahns” are prediabetic, and 90% don’t know they are. The same year of this announcement, the department reported in their Annual Report that the county’s death rate of 27.6 deaths per 100,000 residents was, at the time, greater than the national average, and increasing.

Community initiation and organizational involvement in National DPP implementation

The National Diabetes Prevention Program was first initiated in this area at the University of Utah, who received a grant to implement the program as a research study with employees of the university and their spouses/ family members. Following this initial phase, the university received CDC’s DP14-1422 grant for the expansion of NDPP work, which they then distributed to several local health departments, one of which being the Salt Lake County Health Department.

The Salt Lake County Health Department partnered with the University of Utah to help them implement the National DPP to the broader community by providing technical assistance and support to 14 different agencies executing the program across the county. These agencies range from community groups, pharmacies, and clinics to employee wellness programs. The health department's role in implementing the program included:

- Developing and implementing a marketing plan to help spread awareness about prediabetes and the diabetes prevention program;
- Working with clinics to help them refer patients with prediabetes to the National DPP and screening patients for prediabetes;
- Continuous training of lifestyle coaches; and
- Using internal programs for community member referrals to the program and to raise awareness.

Funding

In addition to CDC's grant, the Salt Lake County Health Department partnered with Intermountain Medical Center, the flagship medical facility for the nonprofit health system Intermountain Healthcare, to provide funding in support of the organizations implementing the National DPP. The department also received in-kind donations of office and program space, incentives, and printing of the lifestyle coach books.

Partners and Stakeholders

Not only a source of funding, Intermountain Medical Center has been a valuable stakeholder in helping Salt Lake County agencies receive resources, referrals, and support for the diabetes prevention program. Its parent organization, Intermountain Health Care, served as a partner agency to both the Salt Lake County Health Department and the Utah Department of Health in conducting a community needs assessment (CNA) last year that revealed prediabetes as a high-priority topic amongst the public.

Other key stakeholders include Health Insight, a quality improvement organization that served as an effective resource in helping Salt Lake County reach out to clinics and connect them to the health department. Through this partnership, the health department has been able to help clinics use their electronic health referral system (EHRS) and provide them with information that they can give their patients. The health department has also been able to develop strong relationships with clinics they work with that also offer the National DPP.

The Utah Department of Health served as a valuable stakeholder, providing Salt Lake County with funds to begin raising awareness about prediabetes, as well as funds and technical assistance to help organizations become recognized National DPP sites. In addition to brainstorming ideas on program sustainability, the Utah Department of Health has also established a statewide phone line for those interested in participating in the National DPP to call in and sign up, and the department is currently developing a website for program coordinators and lifestyle coaches to further aid in implementation.

Another instrumental stakeholder is the Quality and Technical Assistance Center of NY (QTAC), which supports public and private health and community-based partners in disseminating and delivering a series of evidence-based self-management programs that improve communities' health, wellness, and

quality of life. This agency contracted with the Utah Department of Health, allowing the state of Utah to use their database to collect data from the National DPP class and assist in developing Diabetes Prevention Recognition Program (DPRP) reports, a component of NDPP. This assistance proved to be extremely valuable to Salt Lake County's partner agencies, and additionally, the Salt Lake County Health Department's master trainer was certified through QTAC, which has been helping the program expand statewide.

Successes, difficulties, and helpful tips during development, implementation, and enforcement

One of the largest reported successes for Salt Lake County during this process is that the health department went from having only one agency pending recognition as a National DPP program site in 2014 to have a total of 14 sites currently pending recognition.

Another notable success that would serve as a model for other health departments is that the agencies have tailored the program to drive up participation and retention. This includes the expansion of offerings for program participants through better incentives, access to a personal trainer, social worker, and physical therapist, or offering activities such as Zumba.

One model in particular that has been highly successful with one of the department's agencies is offering the program through their staff wellness initiative, and incentivizing employees to both participate in and complete the program. Other agencies have had success by providing a variety of program options, including offering one-on-one sessions in addition to classes, which also helps to provide a basis for comparison in reporting.

Other reported successes include:

- The State of Utah was instrumental in helping to update guidance on expanding funding usage for incentives beyond transportation and childcare to include items such as fitness trackers and gift cards.
- The National DPP is currently being taught in both English and Spanish at participating agencies.
- The health department has incorporated the National DPP in their Worksite Wellness Award application, which helps to spread the word about the program to county worksites.
- Salt Lake County has created a National DPP coalition that includes stakeholders and agencies that meet quarterly to discuss barriers and successes and brainstorm new ideas and best practices.

The implementation of the program was not without its challenges for the agencies working with the Salt Lake County Health Department. One difficulty is that none of the participating agencies have been fully recognized due to difficulties in meeting the DPRP weight requirements. The DPRP, which assures the quality of recognized programs and provides standardized reporting on their performance, mandates that participants in the lifestyle intervention lose 5-7% of their body weight, as this has been associated with a lower incidence of type 2 diabetes. The health department has suggested that program success should be primarily based on blood work testing, rather than weight loss.

Another challenge was the length of the program. The health department and its participating agencies felt that commitment to a yearlong program was arduous for participants. Other reported difficulties include programmatic material not being offered in different languages or being tailored to different

cultures; challenges in getting insurance companies to cover the program; struggles with engaging private sector worksites to develop policies for the National DPP; tailoring the CDC ad campaign for prediabetes; and creating a plan for sustainability.

Despite these issues, the Salt Lake County Health Department has reported that many participants have completed the program, and the department has gathered success stories that demonstrate the program's efficacy and growth in Utah. An important component in tracking the initiative's progress was having participants from the agency sites complete evaluations at week 8 and week 16. This was helpful in gauging the participant experience as it relates to future improvements and the perceived barriers and successes of the program.

For more information, please contact Julia Glade from Salt Lake County Health Department at jglade@slco.org or visit <http://slco.org/health/>