Community Diabetes Education Outreach Program

In Response to:
Rural Health Care Services Outreach Program
HRSA-15-039
CFDA No. 93.912

The purpose of the proposed project is to implement a community-based diabetes education program combined with clinical quality improvement support for rural primary practices to improve diabetes self-management and clinical outcomes. This proposal is a response to the strong need for diabetes education in the target area, identified by both state health statistics and a recent community health needs assessment. The Tri-County Health Improvement Organization (Tri-CHIO) proposes to establish the Community Diabetes Education Outreach Program (CDEOP) to provide comprehensive community-based diabetes education as well as provide support to primary care clinicians to refer patients to the education program and adopt best practices in care for persons with diabetes.

Currently there are only two Certified Diabetes Educators (CDEs) in the three county target area in rural Northwest Oklahoma (Garfield, Grant, and Alfalfa counties). The two CDEs, contribute 1.25 FTE to diabetes patient education. The combined effort of the two CDEs is not sufficient to meet the need in Garfield County, much less the other two counties in the target area that have no CDE programs or support. The first priority of the current proposal will be to hire a Certified Diabetes Educator to provide community-based diabetes education for patients in the tri-county service area. The CDEOP will use the National Diabetes Education Program (NDEP) as its curriculum.

The second component of the program, assisting primary care providers with best practices in care of persons with diabetes, will be accomplished by utilizing the Primary Care Extension Model (Mold, 2011) as a tool for transmitting promising best practice information from the academic medical research centers to rural-based clinicians. The program utilizes a process called academic detailing coordinated by a Practice Enhancement Assistant (PEA). The CDEOP will employ a Practice Enhancement Assistant to help primary care practices implement identified best practices for diabetes care and maintenance. We believe that this combination of community and primary care practice efforts, based in best practices, will help improve diabetes patient outcomes in the three county area of Garfield, Grant, and Alfalfa Counties in rural Northwest Oklahoma.

As a current ORHP Rural Health Network Development Planning Program grantee, our coalition proposes to use the network developed under that project as the platform to successfully launch the Community Diabetes Education Outreach Program. The Tri-County Health Improvement Organization (Tri-CHIO) was developed to improve the health of the populations of three contiguous counties in Northwest Oklahoma: Alfalfa, Garfield, and Grant counties. The Tri-CHIO’s mission is “partnering to improve and expand access to healthcare and social services...through disease prevention, education, and influence of public policy.” Four organizations from the Tri-CHIO have partnered to become the consortium of the Community Diabetes Education Outreach Program: Great Salt Plains Community Health Center, Enid Community Clinic, St. Mary’s Regional Medical Center, Oklahoma State University’s Center for Health Sciences, and Rural Health Projects, Inc./Northwest Area Health Education Center (RHP/NwAHEC) as the fiscal agent. The consortium will be a committee of and report to the Tri-CHIO.

By developing and implementing the proposed Community Diabetes Education Outreach Program (CDEOP), the Tri-CHIO will, in addition to providing comprehensive, community-based diabetes education through a CDE, support continuous quality improvement (QI) in primary care practices in Alfalfa, Grant, and Garfield counties. These initiatives will improve health outcomes for
persons with diabetes and those at risk of developing diabetes and ultimately improve the health of the residents in these three counties.

Specifically, we will utilize the National Diabetes Education Program (NDEP) developed jointly by the National Institutes of Health (NIH) and the Centers for Disease Control and Prevention (CDC). The expected outcomes of the proposed project are that persons with diabetes will be better able to manage their chronic condition through increased knowledge and skills, and clinicians will be better equipped to provide the best clinical care through increased knowledge and awareness of best practices. The objectives of the proposed project are:

1. To establish an evidence-based diabetes education program available to persons across the target area.
2. Communicate program details to primary care providers and provide academic detailing and practice facilitation to them in order to provide a system for clinical referrals to the diabetes education programming.
3. Assist rural-based providers with educational needs regarding current clinical best practice guidelines for patients with diabetes or at risk of developing diabetes through academic detailing, performance evaluation and feedback through practice facilitation, and email connections to diabetes experts to answer specific questions that arise.
4. Develop a resource guide for clinicians and patients in the three county target area.
5. Establish a feedback loop with primary care providers to evaluate program outcomes and conduct ongoing program evaluation.
6. Prepare for sustainability of the Community Diabetes Education Outreach Program by disseminating program information and securing ongoing funding.

To accomplish these objectives, RHP/NwAHEC, as the fiscal agent and staffing agency, under the guidance of the Tri-CHIO’s CDEOP committee (the consortium), will employee a Certified Diabetes Educator to provide NDEP education to persons in the communities at familiar places and during times that are convenient. Additionally, RHP/NwAHEC will transition the Tri-CHIO Program Coordinator into the role of a Practice Enhancement Assistant (PEA) to provide practice facilitation to primary care practices in the three county area. The Program Coordinator/PEA will work with primary care practices to implement identified best practices for diabetes patient self-management support, including providing referrals by the clinicians to the NDEP classes.

**Telligen Community Initiative grant:**

The Tri-CHIO with Rural Health Projects, Inc. as the fiscal agent, proposes to hire and train a half-time (20 hours per week) Community Health Worker (CHW) from and for the Micronesian population in Grant, Garfield, and Alfalfa Counties in rural Northwest Oklahoma. The CHW will serve as a liaison between health care and the Micronesian population to reduce language and cultural barriers. The CHW will also provide educational sessions about chronic conditions and other health topics to increase knowledge about these topics.