



PREVENTION **FORWARD**

Capitol Region Right Care Initiative
University of Best Practices Meeting
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Burden of Diabetes, Heart Disease, and Stroke



Burden of Diabetes

- Prevalence of Diabetes
 - The estimated prevalence of diabetes among California adults significantly increased from 8.7 percent in 2013 to 10.7 percent in 2017 ($p < 0.05$).
 - In 2017, nearly 2.6 million California adults reported having type 2 diabetes, accounting for 83.0 percent of diabetes cases among California adults.

Taylor CW, Downie C. (2019). Burden of Diabetes in California. California Department of Public Health. Sacramento, California.

Burden of Diabetes

- Prevalence of Diabetes, Prediabetes, and Type 2 Diabetes Among California Adults by Selected Socio-Demographic Characteristics
 - Adults 65 years and older self-reported the highest prevalence of diabetes
 - Higher among racial/ethnic groups compared to non-Hispanic Whites
 - Slightly higher among males than females

Taylor CW, Downie C. (2019). Burden of Diabetes in California. California Department of Public Health. Sacramento, California.

Burden of Cardiovascular Disease (CVD)

- Over 8.3 million Californians—nearly one in three adults in the state—have at least one of the four most common forms of cardiovascular disease (heart disease, heart failure, hypertension and stroke)
- Almost half of Californians aged 55-64 years have been diagnosed with CVD
- Adults 65 years and older, the prevalence of stroke is 8.5 percent (1 in 12) overall, and risk continues to climb with age and has approximately doubled after age 85 years to 16.1 percent (1 in 6)

Conroy SM, Darsie B, Ilango S, Bates JH (2016). Burden of Cardiovascular Disease in California. Sacramento, California: Chronic Disease Control Branch, California Department of Public Health.

Burden of Cardiovascular Disease

- The highest prevalence is reported by Native Americans (44 percent) and African Americans (40 percent), and the lowest is among Asians (25 percent) and non-Hispanic whites (28 percent)
- Nearly 7.9 million adults (27 percent) report they have been diagnosed with HTN in California, according to the 2013–2014 CHIS.

Conroy SM, Darsie B, Ilango S, Bates JH (2016). Burden of Cardiovascular Disease in California. Sacramento, California: Chronic Disease Control Branch, California Department of Public Health.

Prevention Forward

Goal

To improve the health of Californians through prevention and management of heart disease, stroke, high blood cholesterol and diabetes.

Mission

To support state and federal investments in implementing and evaluating evidence-based strategies to prevent and manage cardiovascular disease (CVD) and diabetes in high-burden populations in CA, contributing to improved health outcomes.

Prevention Forward - Objectives

1

- Assess and increase use of reporting systems to identify and report standard clinical quality measures, and/or refer patients with chronic conditions (CC) to CDC-recognized lifestyle change programs.

2

- Identify policies and procedures to identify, manage, and prevent CC.

3

- Assess and increase use of team-based care models to manage, monitor, and refer patients with CC to CDC-recognized lifestyle change programs.

Prevention Forward - Strategies

- Category A: Diabetes Management and type 2 Diabetes Prevention
- Category B: Cardiovascular Disease Prevention and Management

Category A Strategies

- A. 1 Improve access to and participation in American Diabetes Association (ADA)-Recognized/American Association of Diabetes Educators-Accredited Diabetes Self-Management Education/Support (DSMES) programs in underserved areas.
- A. 3 Increase engagement of pharmacists in the provision of medication management or DSMES for people with diabetes.
- A.4 Assist healthcare organizations in implementing systems to identify people with prediabetes and refer them to CDC-recognized lifestyle change programs for type 2 diabetes prevention.

Category A Strategies (Cont.)

- A.6 Implement strategies to increase enrollment in CDC-recognized lifestyle change programs.
- A.7 Develop a statewide infrastructure to promote long-term sustainability/reimbursement for community health workers (CHWs) to establish or expand their use in CDC-recognized lifestyle change programs.

Category B Strategies

- B.1 Promote the adoption and use of Electronic Health Record (EHR) and Health Information Technology (HIT) to improve provider outcomes and patient health outcomes related to identification of individuals with undiagnosed hypertension (U/HTN) and management of adults with hypertension (HTN).
- B.3 Support engagement of non-physician team members (i.e. nurses, pharmacists, nutritionists, social workers, and CHWs) in HTN and cholesterol management in clinical settings.

Category B Strategies (Cont.)

- B.4 Promote adoption of Medication Therapy Management (MTM) between pharmacists and physicians for the purpose of managing high blood pressure (HBP), high blood cholesterol (HBC), and lifestyle modification.
- B.5 Implement strategies to increase enrollment in CDC-recognized lifestyle change programs.

PREVENTION FORWARD

CDC 1815



“Improving the Health of Americans Through Prevention and Management of Diabetes and Heart Disease and Stroke – Financed in Part by 2018 Prevention and Public Health Funds (PPHF) – CDC NU58DP006540”

- 1 Shasta County
- 2 UC Davis Medical Center
- 3 Touro University
- 5 UC Berkeley Right Care Initiative
- 6 San Joaquin County
- 7 Merced County
- 8 Madera County
- 9 Monterey County
- 10 Fresno County
- 11 Tulare County
- 12 Northridge Hospital Foundation



Prevention and Management of Heart Disease, Stroke, Diabetes, and High Blood Cholesterol, and their associated risk factors, make a huge impact on the health of Californians

September, 2019



Partners - Clinics and Health Systems

- Local County Partnership
 - Fresno, Madera, Merced, Monterey, Shasta, and Touro University
- Health Systems
 - UC Davis Medical Center
 - Dignity Health: Northridge Hospital Foundation

Partners - Community Health Workers

- CA DHCS Health Homes Program for Patients with Chronic Conditions
- CDPH Environmental Health Investigations Branch – CHW Asthma Academy
- UC San Francisco Transitions Clinic Network
- UC Berkeley, Right Care Initiative
- Visión y Compromiso (promotoras)

Partners - Training and Technical Assistance

- UC Berkeley, Right Care Initiative
- Intrepid Ascent (HIT consultant)
- UC Davis (Evaluation)
- Visión y Compromiso (CHW Consulting)
- DSMES Consulting (TBD)

Category A - Successes

- Convened the California Prevent Diabetes: Screen, Test, Act Today™ (CA PDSTAT) “Let’s ‘Glu-Close’ the Gap!” meeting, Sacramento, Aug. 22, 2019
 - 45 attendees (LHDs, health plans, partner universities and organizations, pharmacists, epidemiologists, and health coaches)
 - DSME online tool training. Presenter: Laura Edwards, President and Chief Executive Officer of Collaborative Health Solutions
 - Presentation on race and health equity in public health. Presenter: Dr. Flojaune G. Cofer, Senior Director of Policy, Public Health Advocates

Category A - Successes (Cont.)

- Developed and distributed a bi-annual DSMES Assessment Survey to DSMES programs to assess challenges to program retention
 - Identified DSMES programs in need of TTA. Provided six scholarships to attend *ADA's Education Recognition Program Diabetes Self-Management Education and Support Recognition Symposium*, San Francisco, Jan. 30, 2020

Category A - Successes (Cont.)

- Coordinated with California Wellness Plan Implementation (CWPI) Program Goal 2 Comprehensive Medication Management (CMM) Workgroup
 - Training and technical assistance (TA) to Clinics. CWPI A3 Collaborative Partnership provided TA to 4 clinics, including PF-funded contractor Dignity Health: Northridge Hospital Foundation
 - Pharmacy Survey. CWPI CMM workgroup provided input on development of PF Pharmacy Survey. Sent to approximately 6,000 pharmacies/pharmacists; 145 responded; and UC Davis will analyze the results

Category A - Successes (Cont.)

- LHD and health systems partnered with clinics that provide National DPPs in their jurisdiction
 - In 2020, Intrepid Ascent will provide TA to set up EHR systems in clinics
- **Diabetes Awareness and Outreach Campaign**
 - Creative Concepts were focus group tested with English- and Spanish-language participants, December 2019
 - Ads will be revised based on feedback, then sent to CA Health and Human Services Secretary's Office for final approval
 - Advertising campaign will launch in June 2020 with outdoor, radio, and digital ads

Category B - Successes

- Convened the Healthy Hearts California Alliance two-day “Advancing Team-Based Care: A Path to Healthy Hearts in California” conference, June 17-18, 2019
 - 125 participants (funded partners, pharmacists, health care providers, public health professionals, CVD experts, and stakeholders)

Category B - Successes

- Promoted sustainability of CHW
 - Sacramento City College CHW Curriculum
 - Partnered with American Heart Association CHW workgroup to increase local coordination for heart disease prevention and outreach intervention in clinical settings
- SMBP trainings conducted in English- and Spanish-language
 - 75 participants, primarily CHWs, in Fresno and Shasta counties

How you can get involved

- **Stay connected.** Join CA PDSTAT and HHC Alliance.

CA PDSTAT <https://www.surveymonkey.com/r/VFV633C>

HHC Alliance

<https://www.cdph.ca.gov/Programs/CCDPHP/DCDIC/CDCB/Pages/HealthyHeartsCAMembership.aspx>

- **Share your expertise.** Present at PF meetings, conferences, and webinars.
- **Coordinate** with State and Local partners.
- **Leverage your promotional activities** with the Diabetes Awareness and Outreach Campaign advertising campaign in June 2020.





Questions

Contact Us

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