



Robert Wood Johnson Foundation

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DIABETES INITIATIVE
A National Program of The Robert Wood Johnson Foundation



Self-Management in Primary Care: Expanding the Reach of CDEs Through Health Promoters

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Objectives

- List different ways a health promoter (promotora) can be used as a physician extender
- List ways a CDE is involved in program development and quality improvement using the Chronic Care Model



Recruitment and Initial Training

- Recruitment
 - Promotoras selected by their doctors. They have diabetes or a family member with diabetes.
- Initial Training (ten 2 hr sessions)
 - Diabetes self management skills,
 - Collaborative goal setting, action plans and problem solving
 - Counseling methods and confidentiality
 - Group facilitation





Promoter On-going Follow-up and Support

- **Selected topics (every 2 weeks for 3 hours)**
 - Stages of change model
 - Depression and stress management – 18 hours
 - Medications
 - Cardiovascular disease
 - Meal planning methods
 - Smoking cessation
 - Food stamps, food bank, emergency services
 - Complications of diabetes
 - Asthma
 - Documentation of patient intervention
- **Monitoring –**
 - Clinical information system



Roles and Responsibilities of Promoter as Physician Extender

- Provide follow-up and support through one on one phone counseling
- Lead/facilitate groups – walking club, support group, depression group
- Serve as liaison between patient and provider - case conferences.
- Serve as advocate for patients' needs
- Provide diabetes self management education – teach classes
- Facilitate participation in health care system



Promoter Intervention and Documentation

- **Promoter intervention included**
 - Self management education in 4 areas
 - Meal planning
 - Exercise
 - Self monitoring of blood sugar
 - Medicine adherence
 - Determination of stage of change
 - Use of stage specific questions designed to move the patient along the continuum of change
 - Goal setting, barriers identification and problem-solving
 - Social support
- **Documentation**
 - Stage of change every 3 months
 - Clinical outcomes (A1c, LDL-cholesterol, blood pressure)

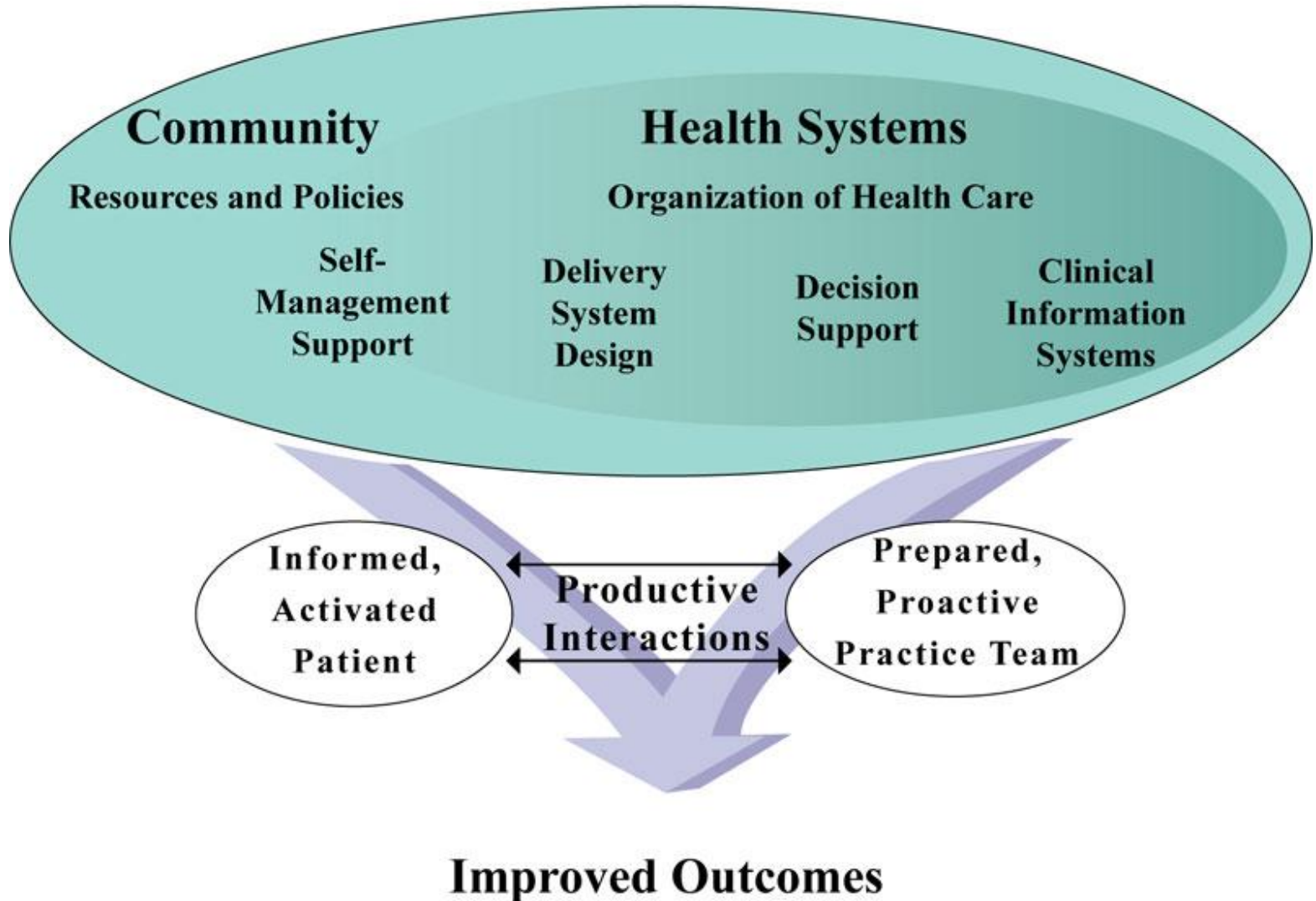


Comparison of Change in A1c, From Baseline to 6 Months and Baseline to 1 Year in the Total Sample

	HbA1c (n=142)
Baseline	8.73
6 months	8.37 (p<.015)
1 year	8.25 (p<.004)



The Chronic Care Model





System Changes Involving the Promoter, CDE and Other Players

- **Community linkages**

- Promoter is the link to the community
- Promoter routinely distributed diabetes information at Farmers Market and health fairs
- CDE instrumental in arranging a contractual partnership between Robert Wood Johnson Foundation, Lumetra and La Clinica for production of educational materials

- **Delivery System**

- Physician referral to health promoter program
- CDE developed provider/promoter guide to Stages of Change intervention
- CDE provided training to promoters to enhance their knowledge and counseling skills
- Promoter contributed to continuity and coordination of care



System Changes Involving the Promoter, CDE and Other Players

- Organization of Health Care
 - CDE involved in program planning, leadership and oversight
 - CDE attends all diabetes related continuous quality improvement committees
 - Promoter became integrated into the clinic's activities
- Decision Support
 - Promoter attended quarterly case conferences with providers



System Changes Involving the Promoter, CDE and Other Players

- Clinical Information System
 - An additional registry flow sheet was developed to document patient activities and assessment using stages of change in areas of behavior change, self efficacy, social support
 - Promoters did some of the data entry
 - CDE tracked promoter adherence to program expectations and provided feedback



System Changes Involving the Promoter, CDE and Other Players

- Patient Self Management
 - Promoters provided self management support
 - Promoters led groups (diabetes classes, walking club, support group)
 - CDE developed a series of stage specific pamphlets on each of the 4 behavioral areas
 - Promoters used Stages of Change for assessment and for stage specific intervention strategies
 - Promoters used Viva la Vida, a bilingual low literacy manual for diabetes education, developed by the CDE
 - Promoter and mental health specialist co-facilitated depression groups



Stages of Change and Behaviors

Stages - definition

- Pre-contemplation – I can't; I won't
- Contemplation – maybe I will
- Preparation – I will
- Action – I am doing
- Maintenance – I have been doing

Behaviors - recommendations

- Exercise – 30 min 5 days a week
- Blood sugar monitoring – at least 1x/d
- Healthy eating – follow meal plan 5 days
- Taking medications – 9 out of 10 times



Pre-Contemplation: Exercise



What if I'm not ready to exercise?

You may not be ready for exercise today. Some people find it hard to exercise. Do any of these reasons fit for you? Check any that apply and/or add your own.

- I'm too tired after work.
- I don't have the time.
- I can't because of my knees.
- It's too hot (or cold).
- My neighborhood is not safe.
- I don't like it.

Add your own: _____



How would you like things to be different?

Check any that apply and/or add your own.

- I would like to feel better.
- I would like to have better-controlled blood sugar levels.
- I would like to have more energy.
- I would like to lose weight.

Add your own: _____



What can exercise do for you?

Exercise has short-term and long-term benefits. Check any that you are interested in.

Short-term benefits:

- It lowers blood sugar levels.
- It helps you handle stress better.
- It helps you sleep better.
- It gives you more energy.

Long-term benefits:

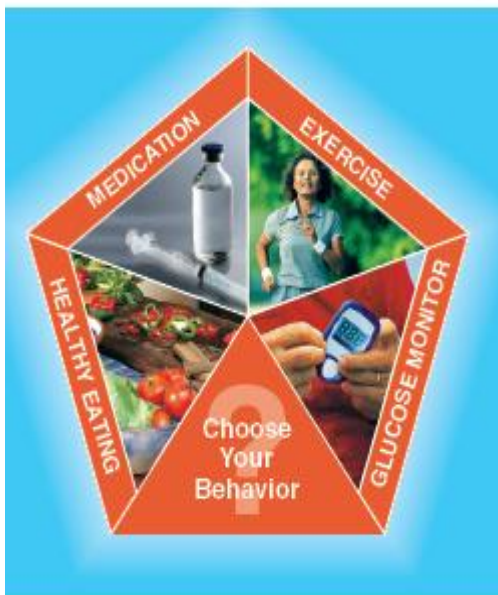
- It helps keep weight under control.
- It helps improve blood pressure and cholesterol.
- It helps prevent fractures.
- It helps improve pain from arthritis.



Provider Guide

Guide to

Stages of Change Interventions



USING THE TRANSTHEORETICAL MODEL
FOR YOUR PATIENTS WITH DIABETES

Contemplation

1. **(Normalize ambivalence)**
Some people don't like to....., yet they know it is important.
2. **(Consider the 'cons')** What is it that makes it difficult for you?
3. **(Consider the 'pros')** What would be some reasons to start doing it?
4. **(Self re-evaluation)** How much does your family know about your diabetes? How do you think your diabetes affects them?
5. **(Examine options)** If you were to do start, what do you think you would do?
6. **(Emphasize patient control)** With any chronic condition, you are the one in charge. Your health depends on your ability to make the changes that are right for you.



Educational Materials

Viva la Vida

- Guide to Stages of Change Interventions
- Thinking about checking your blood sugar (Pre-contemplation)
- Thinking some more about checking your blood sugar (Contemplation)
- Preparing to check your blood sugar (Preparation)
- Checking your blood sugar (Action and Maintenance)
- Stage specific series for additional topics:
 - Following a meal plan
 - Taking medications appropriately
 - Doing exercise
- All educational materials available in English and Spanish at:
<http://www.lumetra/resource-center/index.aspx?id=164>
<http://www.diabetesinitiative.org>