

County of Santa Clara Public Health Department



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DATE: January 30, 2019

TO: Honorable Members of the Board of Supervisors
Jeffrey V. Smith, M.D., J.D., County Executive

FROM: René G. Santiago, Deputy County Executive/Director, SCVHHS

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Sara H. Cody, MD, Health Officer and Public Health Director

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SUBJECT: Report related to the Diabetes Prevention Initiative Dashboard

At the Board of Supervisors meeting of June 12, 2018, the Board requested that the Public Health Department provide on a quarterly basis a dashboard relating to the implementation of the Diabetes Prevention Initiative. This report provides the first quarterly report.

Background Information on Pre-diabetes and Diabetes

Nearly half of adults (46%) in Santa Clara County are estimated to have prediabetes or undiagnosed diabetes, with 90% of these people unaware of their status. A person with prediabetes has a blood sugar level that is higher than what is considered normal but not high enough for a diagnosis of diabetes. Those with prediabetes who receive no intervention have a 15 to 30 percent chance of developing type 2 diabetes within five years. The California Medi-Cal program is projected to save more than \$45 million a year in diabetes costs through the implementation of the Diabetes Prevention Program (DPP), an evidence-based behavior change program from the CDC.

The Diabetes Prevention Initiative (DPI)

In an effort to respond to the Type 2 diabetes epidemic, the Board of Supervisors launched the Diabetes Prevention Initiative (DPI) in February, 2015. The 2016-2019 DPI Strategic Plan was developed in partnership with key stakeholders and addresses three key focus areas: (1) raise awareness of prediabetes and prevention, (2) increase prediabetes screening & referral, and (3) improve access and coverage to the CDC’s Diabetes Prevention Program (DPP). The plan incorporates evidence-based programs and initiatives such as the CDC Type 2 Diabetes Risk Test and the American Diabetes Association Risk Test; the CDC’s DPP behavior/lifestyle change program; and the CDC and American Medical Association (AMA) Screen, Test, Act, Today (STAT) toolkit for medical providers, health and clinic systems. In addition, the plan encourages the planning and

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County Executive: Jeffrey V. Smith

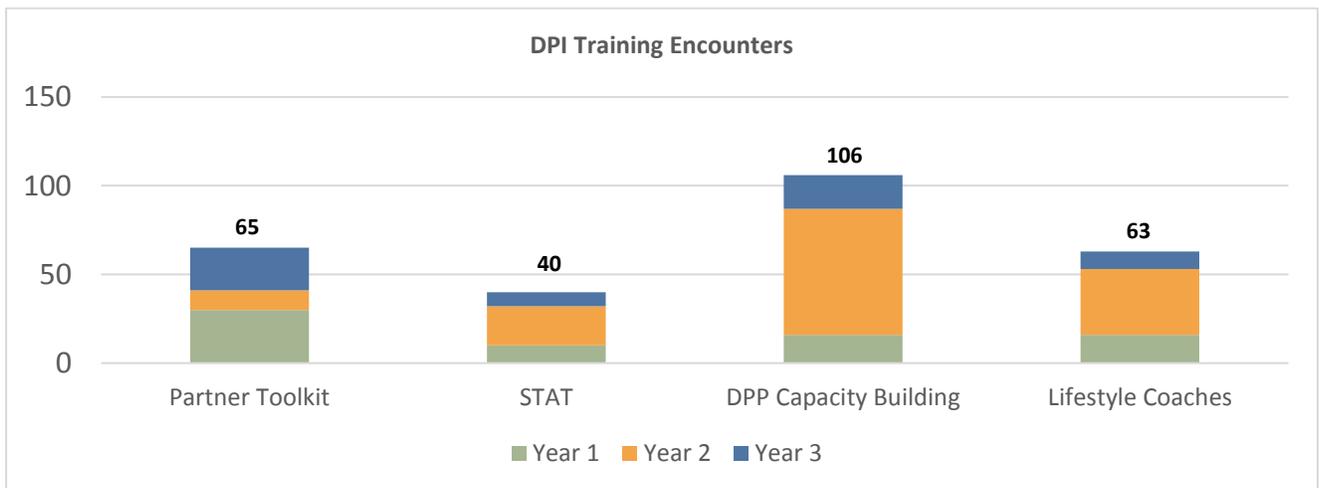
implementation of innovative and/or promising practices designed with the intent of meeting the needs of our diverse County. The DPI collaborative was formed to implement the DPI Strategic Plan.

Progress of the DPI

Over the past two-and-a-half years, significant progress has been made to build capacity and promote diabetes prevention in the community and clinics. The DPI collaborative has engaged more than 475 staff from 152 organizations in diabetes prevention efforts while implementing the DPI Strategic Plan. The Public Health Department (PHD) successfully engaged agencies at high levels to participate in work groups to implement and adopt strategies across the three focus areas outlined in the plan.

Trainings and support provided by the PHD team and partners have built capacity and empowered partners, serving as the foundation of the Collaborative’s work. Trainings and technical assistance provided by PHD and partners include (1) overview of data and the DPI implementation plan, (2) training on the Partner Diabetes Prevention Outreach and Education Toolkit, (3) guidance on the Screen, Test, Act Today (STAT) Toolkit (4) building capacity to become a Diabetes Prevention Program provider, and (5) coordinating DPP lifestyle coach certification training.

PHD staff has supported DPI partners to promote a collective impact model for building awareness among community based organizations and collaboratives. Below is the number of training and technical support encounters provided by PHD staff:



Increase Awareness of Diabetes Prevention (Focus Area 1 of Strategic Plan)

The first goal of the first DPI Strategic Plan is to increase awareness and knowledge among residents, community organizations and health care providers about risk factors for prediabetes and actions to take to prevent type 2 diabetes.

Key Accomplishments

- Communicated the risks of prediabetes more than 159,000 times since July, 2016 through Collaborative newsletters, media campaigns, social media postings and on websites.
- Distributed nearly 120,000 pieces of diabetes prevention educational materials to community members.
- Distributed prediabetes risk and prevention information to all 20,000 County employees.
- Developed and distributed more than 5,000 copies of “Your Resource Guide to Preventing Type 2 Diabetes,” an English/Spanish bilingual resource booklet for linking at-risk people to community resources to help prevent the development of type 2 diabetes in community and clinic settings.
- Reached 3,500 medical providers on DPI activities through articles in the Santa Clara County Medical Association and Monterey County Medical Society.

Future Steps in 2019

- Continue to promote prediabetes awareness through social media and other media channels.
- Complete a Vietnamese Diabetes Prevention booklet and share with Vietnamese community organizations and groups.
- Encourage and convene community organizations to increase awareness among high risk individuals about the new DPP benefit available to them from their health plans, Medicare and Medi-Cal.
- Identify resources and potential partnerships at the state-level to pay for local media campaign that prioritizes high-risk Latinx communities.

Increase Pre-Diabetes Screening and Referral (Focus Area 2 of Strategic Plan)

The goal of this focus area is to increase access to screening (risk testing and blood glucose testing) and referrals for those most at risk for prediabetes and diabetes. To achieve this goal, PHD and DPI partners engage community organizations in risk testing; share lessons learned from pilot clinics with other systems; promote implementation of prediabetes screening & referring in clinics; and promote other prevention strategies and community resources in the clinics.

Key Accomplishments

- Trained 65 community based organizations in the DPI Communications, Outreach, and Education Partner Toolkit.
- Administered more than 13,500 diabetes risk test screenings, with an estimated 30 percent of participants found to be at-risk for prediabetes. Individuals found to be at-risk for prediabetes were referred to their clinician or health clinic.
- Community partners administered diabetes blood test screenings to 9,200 people at community events and settings.

- Supported the Diabetes Prevention work group of the SCVHHS Transformation 2020 (T2020).
- Launched two clinic-based pilot projects at (1) St. James Clinic-Gardner Family Health Network led by Community Health Partnership, and (2) the Valley Health Center (VHC) Sunnyvale and East Valley clinics.

Future Steps in 2019

- Increase risk factor testing and partner with community based organizations.
- Partner with the American Heart Association to (1) organize a symposium in spring 2019, (2) advance system changes that facilitate prediabetes screening and referral to DPP, and (3) address access challenges for high risk patients.
- Promote increased screening of diabetes and prediabetes across all health systems in SCC.

Improve Access to and Coverage of Evidence-based Diabetes Prevention Programs (Focus Area 3 of Strategic Plan)

The goal of this focus area is to increase coverage for and access to evidence-based Diabetes Prevention Programs. Key activities have included increasing health plan and employer coverage of DPP, and developing a plan to increase diabetes and prediabetes screening. DPI engaged partners from local health insurance plans, local universities, County leadership, community leaders and other key stakeholders with the ability to support DPP. DPP is a medical benefit now covered by Medicare and Medi-Cal.

Key Accomplishments

- Assessed availability of DPP programs in the County.
- Delivered CDC approved DPP lifestyle coach training to 63 individuals, an increase of 21 life style coaches since the report to the Board in March, 2018.
- Engaged local health plans in preparing for the new DPP covered medical benefit under Medicare and Medi-Cal. The Centers for Medicare and Medicaid Services (CMS) began Medicare DPP coverage on April 1, 2018. As of January 1, 2019, the State of California provides DPP coverage for Medi-Cal beneficiaries.
- Shared information on CALPERS coverage of DPP for their members.
- PHD executed two contracts with the Indian Health Center and YMCA to build their DPP capacity and to help them to meet the cultural and language needs of high-risk communities in the County.

Future Steps in 2019

- Provide Capacity Building training and technical support to DPP providers and contracted partners.

- Support the continued expansion of the DPP provider network through DPP lifestyle coach training.
- Increase the capacity of DPP providers to meet the culture and language needs of high-risk populations.
- Inventory and document all evidence-based best practices for diabetes prevention for adults and youth.
- Increase awareness of the economic and health benefits of DPP among local employers.

Conclusion

The Diabetes Prevention Initiative has embodied the spirit of collaboration among clinic and community partners, all working together to improve health outcomes for people at risk for pre diabetes, with prediabetes and those with type diabetes. Since the initial investment by the Board of Supervisors in 2015, Santa Clara County has made progress on all three strategies of the DPI, building resources and implementing systems changes to combat this epidemic. By partnering with community organizations and County departments (PHD, SSA, SCVHHS, VHP, BH), Santa Clara County has been able to leverage local resources and implement strategies similar to other counties in California that received more substantial state and federal resources for diabetes prevention. The strategies in the DPI have served as a model for others in the state and staff have been asked to share lessons learned in our prevention effort with both CDPH and other health care entities in public and private sectors. Looking to future, there are more opportunities to further increase the prevention efforts that support populations impacted disproportionately by diabetes, to formalize prevention protocols for prediabetes in our local health systems, and to establish a culture of prevention in the community.

Please contact Bonnie Broderick at (408) 793-2706 or Bonnie.Broderick@phd.sccgov.org for additional information or if you have questions.

cc: Miguel Marquez, Chief Operating Officer
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