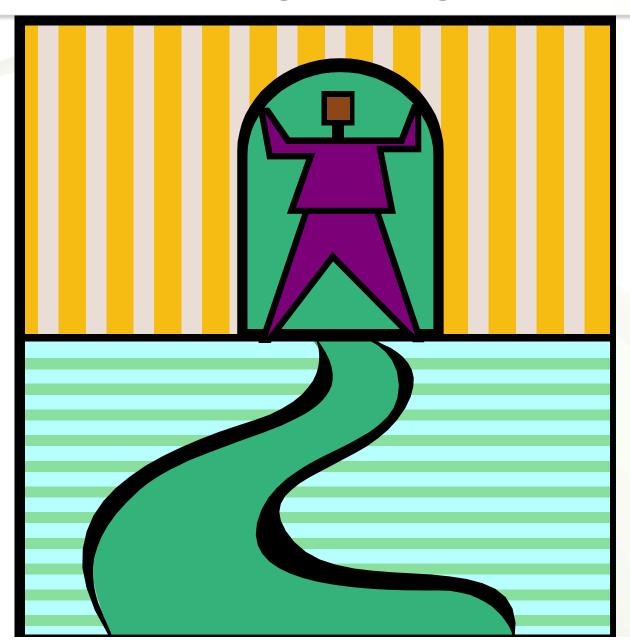
PATH: Seeing "It" Your Way

Dawn Crane, MS, RN, ACNS-BC, CDE

Start from the beginning: PATH



PATH= Personal Action Toward Health

■PATH = Stanford Chronic Disease Self-Management Education Program

■6 sessions each 2 1/2 hours = 15 hours of contact

Scripted = Fidelity= Evidence-Based

■Tool Box = Varied Approaches= Options

Key Assumptions by Stanford group**

Chronic Disease means similar problems and concerns

Must deal with disease AND it's impact on life

Lay people can teach program effectively

Process is as, or more, important than subject matter

^{**}Lorig, K, Gonzalez, V, Laurent, D. CDSMP Leader's Manual, Stanford University, 2006.

Key Elements: Multiple Topics 2012

Action plans Informed treatment decisions

Decision-making Working with the care team

Difficult emotions Healthy eating

Physical Activity and exercise Communication skills

Problem-solving Better breathing

Medication use Weight management

Preventing falls Sleep

Using your mind to manage sx

Pain and fatigue management

Dealing with depression

Future plans

Who's Paying?

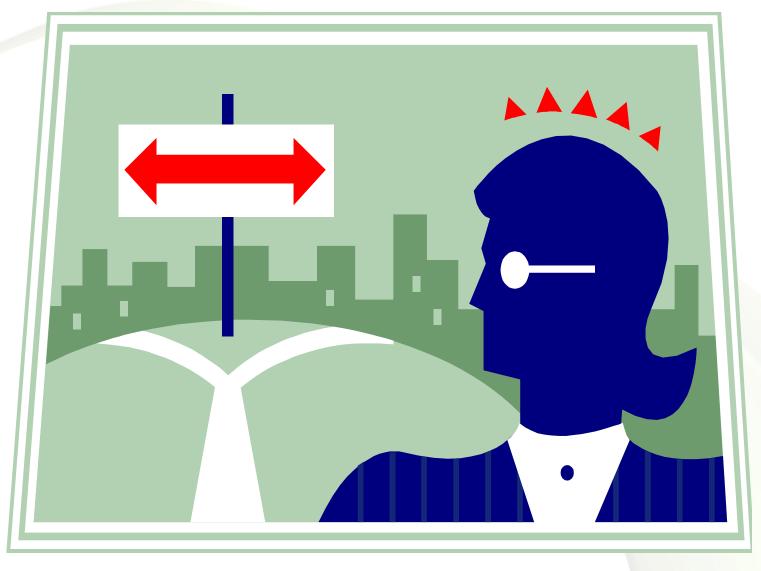
Medicare (Detroit Area Agency on Aging)

Grant monies and funding (CDC, Agency on Aging)

Outreach programs (hospitals)

Third party insurers

The Proverbial Fork in the Road: Diabetes-PATH



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PATH vs. Diabetes-PATH

■ Total of 4 hours (4/15) diabetes specific information

 Participants individualize -not given an "individualized" plan

Same general guidelines

Problem-solve and brainstorm with a diabetes focus

Minutes of "Diabetes"

What is Diabetes (15)

■ Sick Days (25)

■ Foot Care (15)

Stress management (20)

Planning Meals/Meals/Labels (100) Complications prevention (15)

Hypoglycemia prevention (30) ■ Taking Medications (20)**

■ Monitoring (25)

■ Physical Activity (40)**

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**SIMILAR to PATH

Similarities: Diabetes PATH & DSME

Person with diabetes has to do the work:
SELF-MANAGEMENT

- Physical activity and healthy eating are *emphasized*
- Facilitate the "how-to" support is a key element
- People participate/take from it what they want—no tests, no expectations
- Goal setting = Action planning

Similarities: Approach and Personnel

Trained lay leaders (one with diabetes)--MODELING

Group work and "homework"

NO "expert" directions or corrections

 Scripted and predictable "product"--process, process, process—reiteration of topics and practice

People will do exactly what and how much they want

Accreditation for Medicare

Accredited through AADE

Curriculum and educational method (Standard 6)

 MUST refer disease or medical management questions to health care professionals

PATH is licensed, leaders must be trained

The best PATH in Michigan?

Whatever works for the person living with diabetes!

Enjoy the ride!!

Thank you

craned@michigan.gov

PATH in Michigan

Karen McCloskey



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Benefits of PATH

- Consistent, persistent small-to-moderate improvements in:
 - Selected health behaviors
 - Aerobic exercise
 - Cognitive symptom management
 - Psychological health status
 - Depression
 - Health Distress
 - Self-efficacy

Reach & Workforce 2012

- 2,357 PATH Participants
- ■871 Diabetes PATH Participants

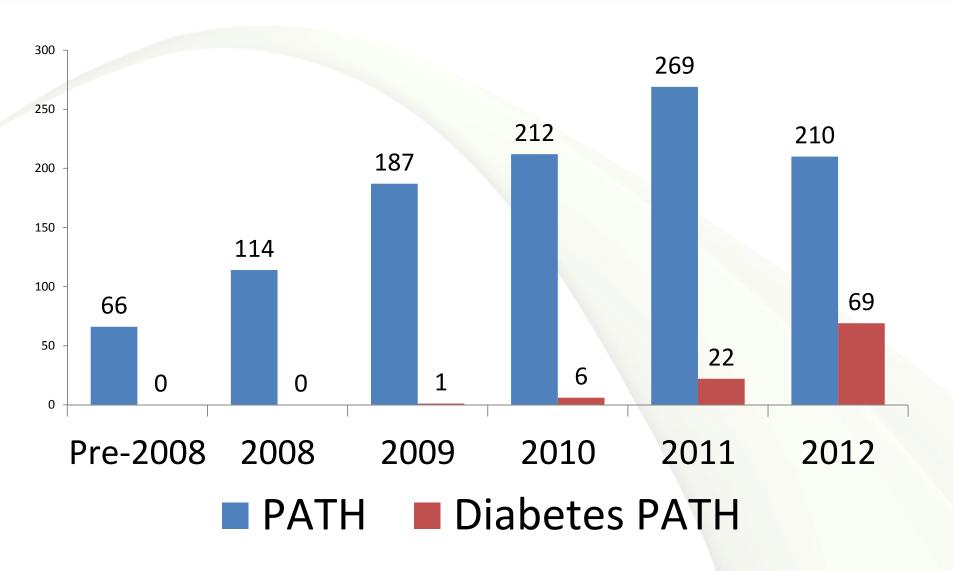
- 211 Active PATH Leaders
- 109 Active Diabetes PATH Leaders

Statewide (Almost)

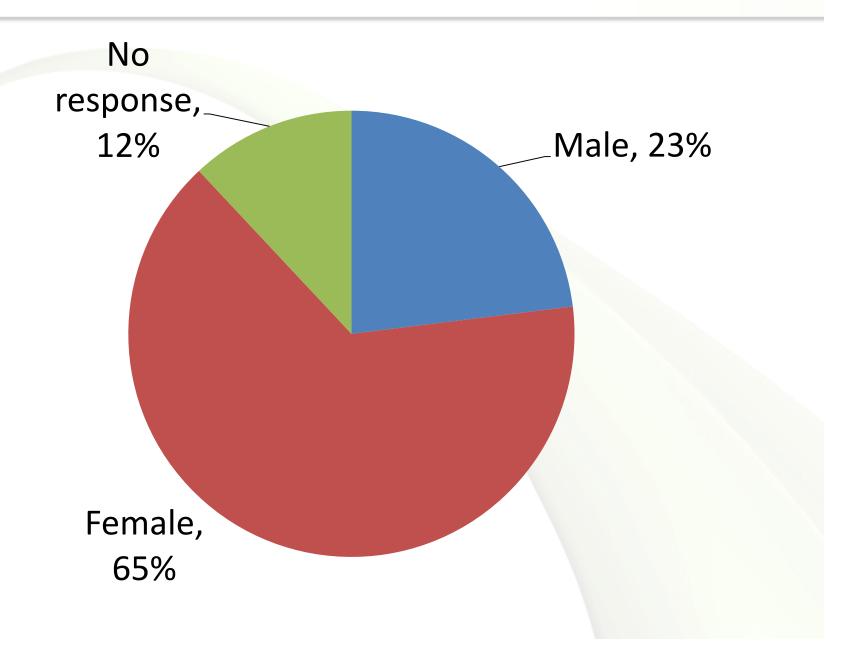
County	PATH Workshops 2012
Wayne	33
Jackson	32
Oakland	19
Macomb	11
Ingham	10
Other Counties	< 10
Total # of Counties	50

County	Diabetes PATH Workshops 2012
Wayne	17
Genesee	6
Washtenaw	4
Calhoun	4
Other Counties	< 4
Total # of Counties	26

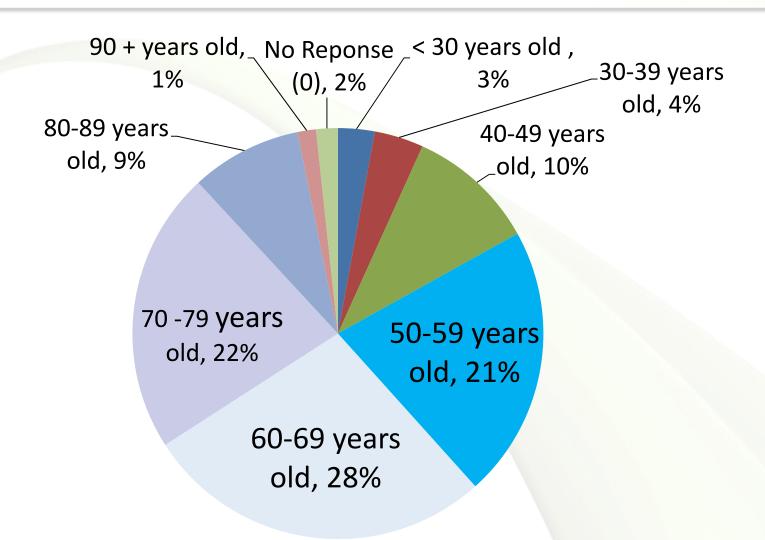
PATH & Diabetes PATH Workshops



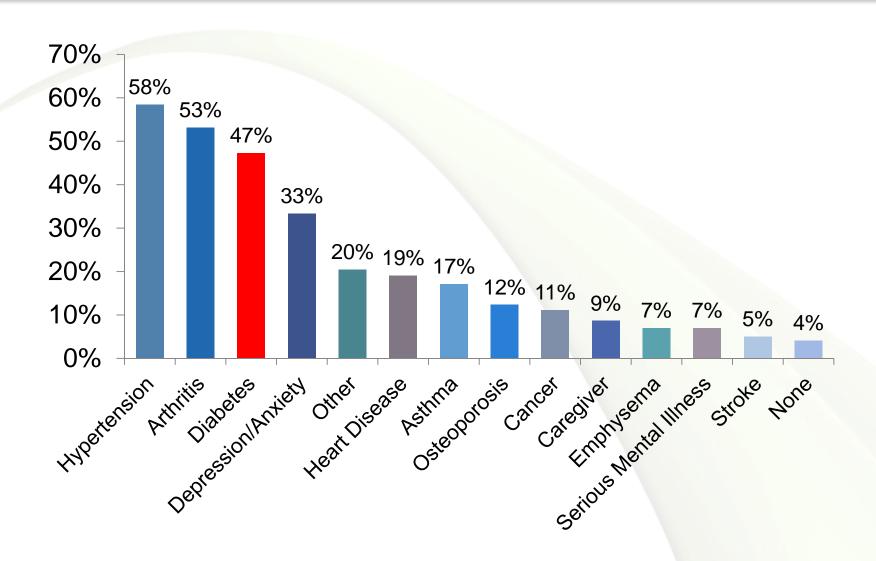
Gender



Age Range of PATH Participants



Chronic Conditions of PATH Participants



Finding Workshops

www.mihealthyprograms.org

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