

# Diabetes Partners in Action (DPAC) History At-a-Glance 1977-Present

The Diabetes Partners in Action Coalition (DPAC) began in the late 1970s as a subcommittee of the Governor's Chronic Disease Advisory Board. When it was first formed, it was named the Diabetes Policy Advisory Committee. Formation of DPAC also fulfilled a CDC funding requirement of the newly implemented Diabetes Control Program (DCP), now named the Michigan Diabetes Prevention and Control Program (DPCP), to assure implementation of a statewide diabetes coalition. The purpose and mission of DPAC has changed over the years based on multiple factors, always with the underlying purpose to inform, motivate and activate the people in Michigan who are affected by diabetes or have a vested interest in bettering the health of those with diabetes. What follows are brief highlights from the coalition—priorities, accomplishments and challenges.

## **Late 1970's**

Main Function: Provide planning and implementation advice for new diabetes projects.

Accomplishments:

- Increased awareness of diabetes and good care to providers and patients;
- Worked with DPCP to create standards and guidelines for appropriate care and patient education;
- Advocated for reimbursement of care and education through Medicare and Medicaid; and
- Advocated for legislation to obtain other third party reimbursement.

## **Early 1980's**

Main Function: Identify key members and continue to advise staff of the DCP on the implementation of new projects.

Accomplishments:

- Played a large role in organizing the Michigan Organization of Diabetes Educators (MODE), which continues to serve as a professional organization for diabetes educators;
- Implemented standards for diabetes education in Michigan;
- Achieved Medicare reimbursement for diabetes education; and
- Achieved Medicaid reimbursement for diabetes education.

**Late 1980's**

Main Function: Continued to serve in advisory role to DPCP; and helped develop and disseminate educational materials. DPAC focused on advising and supporting projects at MDCP, MDRTC and MODE. Members also included nonprofit organizations from the public sector working to improve the lives of people who have diabetes including the American Diabetes Association (ADA) and Juvenile Diabetes Foundation (JDF) and the Minority Health Coalition

Accomplishments:

- Developed and distributed guidelines for diabetes eye care and pregnancy and diabetes;
- Supported and advocated legislative activities encouraging 3<sup>rd</sup> party reimbursement in Michigan; and
- Awarded mini grants to diabetes programs to educate and direct providers on diabetes education reimbursement standards.

**Early 1990's**

Main Function: Continued in an advisory and advocacy role to improve third party reimbursement and increased success of DPCP and other programs.

Accomplishments:

- Successfully advocated for funding for formation of the Diabetes Outreach Network (DON) throughout the state based on the Upper Peninsula Diabetes Outreach Network (UPDON) model (six DONs funded); and
- Implemented the certification program based at MDCH for diabetes education to receive Medicaid reimbursement.

## **Late 1990's**

Main Function: Outreached to identify and recruit new members and continued in the advisory role.

Accomplishments:

- Spent considerable time reviewing the need for appropriate screening methods recognized, ultimately choosing to encourage screening at the primary care level;
- Established workgroups to research and formulate recommendations regarding the increasing diabetes 2 prevalence and the lack of adequate screening methods; and
- Spent considerable energy recruiting and maintaining engaged volunteers.

## **Early 2000's**

Main Function: New leadership in the DPCP focused on development of a planning process for the structure of DPAC.

Accomplishments:

- DPAC was renamed to the current name: Diabetes Partners in Action Coalition;
- Wrote the Michigan Diabetes Assessment (MDA) which was an effort to assess statewide diabetes activities and resources by interviewing members from across the state;
- Formed a steering committee to write the Michigan Diabetes Strategic Plan, which contains 14 recommendations including the restructuring of DPAC;
- Established the DPAC Charter; and
- Established five work groups that would focus on accomplishing the 14 recommendations from the Strategic Plan.

## **Late 2000s**

Main Function: Continue to refine the structure and functioning of DPAC to successfully accomplish the Strategic Plan recommendations.

Accomplishments:

- Established two committees: membership and governance to focus on DPAC structure; and
- The Board prioritized work which centers on one Strategic Plan recommendation per year to improve success in addressing the recommendations within the all-volunteer membership.

- Updated the DPAC Charter and created DPAC position descriptions
- Assisted in the development of the DPCP Strategic Planning Portfolio (2007), a compliment to the Michigan Diabetes Strategic Plan and the Michigan Diabetes Action Plan 2009-2011.

### **Present Day**

Main Function: Coordinate the statewide initiative to prevent diabetes and reduce its complications by addressing the goals outlined in the Michigan Diabetes Action Plan and other related efforts. This will be done through five active workgroups, Board of Directors, and the general DPAC membership.

Accomplishments:

- Assistance in the development of the Michigan Diabetes Action Plan, 2011-2014
- Streamline efforts to advance and promote DPAC and related diabetes initiatives. This includes the elimination of unnecessary subcommittees, defined workgroup annual work plans, and promotion of DPAC and partner activities through social media.