



DPAC Full Membership Meeting Minutes October 20th, 2011

Micki Juip and Paul M. Dake, MD, DPAC Co-Chairs, welcomed new and returning members to the meeting and reviewed the agenda. Sanofi was thanked for the sponsorship of the meeting.

Diabetes Prevention and Control Program (DPCP) Update

Richard Wimberley, MDCH Diabetes and Other Chronic Diseases Section Manager, gave a comprehensive presentation on updates of five key areas: Surveillance, Prevention, Diabetes Self Management Education, Evidenced-Based Programming, and Partnerships. Information was shared how the work relates to the Michigan Diabetes Action Plan and the National Prevention Strategy. Richard shared the three priorities of the CDC Division of Diabetes Translation including: improve quality of care in clinical settings, improve access to diabetes self management education and support services, and increase access to the National Diabetes Prevention Program to prevent or delay the onset of diabetes. A discussion was held regarding the alignment of the DPCP with the CDC initiatives, including a review of current work, future initiatives, and possibly phasing out certain projects. An update on the state and federal budgets was also reported.

Michigan Primary Care Transformation Demonstration

Carol Callaghan gave an overview of the Michigan Primary Care Transformation Project, including information on the cost of chronic disease, the quality of chronic disease care, and the purpose of the project (allow Medicare, Medicaid, as well as commercial insurers to evaluate whether the person centered medical home model improves health, satisfaction with care, and reduces health care costs.) The rest of the presentation focused on the project details and the criteria for practice participation. Part of the requirement includes a focus on four initiatives: individual case management, self-management support, care coordination and linkages to community services. Lastly, potential opportunities to improve diabetes care through the demonstration project were highlighted.

DPAC Workgroups and Membership Committee Reports

The workgroups met from 10:30 – 12:00, before lunch. Each workgroup reported out on their current activities and/or their priorities for the coming year. The highlights include:

Advocacy and Public Policy

- Healthy Michigan Fund (HMF): The workgroup leadership has kept DPAC up to date on the HMF status and also individual member/member organizations have advocated for MDCH to allocate HMF dollars for diabetes and kidney disease.
- Diabetes Month Capitol Event: The event will be held on November 9th, with a 30 minute program at noon in the Rotunda. There will be exhibits, many partners involved, and a special presentation honoring top diabetes and kidney walk teams. All DPAC members are encouraged to attend.
- MDE Diabetes School Policy: The policy is in process of being approved. It was introduced to the State Board of Education in September and will be up for approval in November.
- Potential new legislation: A brief summary was given on the potential legislation (amendment of the Diabetes Cost Reduction Act to include A1C guidelines for diabetes self management education curriculum and the inclusion of mandatory diabetes screening (using the A1C test) for those deemed at risk for developing diabetes. Some concerns were shared to the whole group in regards to not in line with the clinical guidelines and potential issues regarding Medicare reimbursement. Sally provided copies of the draft legislation.

Communication and Public Awareness

- Michigan Diabetes Action Plan, Unified Messaging: The “Make a Move” logo and tagline have been developed. The workgroup participants were the first focus group to test the messages.
- Newsletter: The fall newsletter is done and has distributed (focus on Diabetes Month resources). The next one will be out in December.
- Website: There are additional Diabetes Month resources on the DPAC website and Facebook page. Please check out the website for some of the latest updates. Also, the DPAC Facebook page is receiving more “likes”.
- NDEP materials are available at the DPAC display, including samples of Diabetes Month promotional materials.
- The Governor’s Proclamation for Diabetes Month was recently approved and will be available soon on the coalition website.

Data, Research, and Evaluation (DaRE)

- Raghni and Lori are no longer a part of DPAC, a note will be sent to both thanking them for their efforts.
- The MDCH 2010 Behavioral Risk Factor Survey was recently released. by MDCH. The new diabetes prevalence estimate is 10.1%. A copy of the results is located on each table; it is also available on the www.michigan.gov/brfs .
- The DaRE workgroup recently has assigned liaisons to each of the other workgroups. This will add a person who has interest and/or expertise in data, research or evaluation to each workgroup. Hopefully this will be an asset for each workgroup.
- There is a DMC pilot screening program where all ER patients will receive an A1C test. If they are diagnosed with diabetes, there will be additional follow up and education at no charge. There will be a possible DPAC presentation on the program results in May.

Prevention

- Prevention is decided to focus their efforts and break into 3 work teams: collaboration, youth, and employer.
- Youth: This team is assessing prevention activities for women of child bearing age, pregnant women, and mothers with children. They are currently developing their work plan.
- Collaboration: The team is working to increase the prevention workgroup membership, and have surveyed current members for potential partners who are interested and/are working in prevention.
- Employer: This team is developing materials to “make the case” for diabetes prevention in the workplace and will be identifying and recruiting sites to implement the Michigan Diabetes Prevention Course.
- The Diabetes and Prediabetes Treatment Guidelines have been updated and are being distributed. A copy is in the DPAC packet and also available on the DPAC website.

Training and Education

- The workgroup is finalizing the diabetes goal setting project. It will be helpful resources around goal setting and can be used by both patient and clinicians.
- The workgroup is continuing to use NDEP materials as a resource for its projects.
- There are many new members so the group spent some time reviewing their materials and projects.
- The workgroup is developing an article for the DPAC newsletter.

DPAC Board Update

Dr. Dake and Micki Juip presented several updates. The first item of business was an overview of the revision of the DPAC charter (which was previously sent out and also a copy is in the meeting packet). The in-person participants were given the opportunity to vote on the adoption of the new changes (voting will also be available online). Secondly, the DPAC Annual Membership Survey was distributed (it will also be available online for those not in attendance). In addition, DPAC members were encouraged to take a copy of the Michigan Diabetes Action Plan and use it as a guide to DPAC workgroup activity and respective organizations. Finally, a tribute was given to Maurie Ferriter by Sally Joy. Maurie worked at the National Kidney Foundation of Michigan and was a passionate advocate for chronic kidney disease (as well as diabetes). Maurie passed away this past August and was also a former member of DPAC.

Type 2 diabetes Vietnam Veteran Benefit

Herbert Hess from the State of Michigan Department of Military and Veterans Affairs, gave an overview of the type 2 diabetes in-country Vietnam Veteran benefit. Type 2 diabetes is considered a presumptive condition for those honorably discharged veterans who served from 1962 to 1975. Service connected disability compensation monthly benefit is a range from \$123 to \$2,673. Mr. Hess encouraged those who are interested to contact a county veteran counselor (www.macvc.net) or submit an application directly on www.va.gov

Sleep and Diabetes: What is All the Fuss About?

Cheryl Tannas presented on the relationship between sleep and diabetes, including how sleep impacts diabetes. Specifically material was given on how sleep duration and quality impact insulin resistance, appetite, physical activity, and overall metabolic control. The following sleep disorders were discussed: Sleep apnea (including the International Diabetes Federation recommends all people with type 2 diabetes be screened for Obstructive Sleep Apnea (OSA) and vice versa), Restless Leg Syndrome and Insomnia. Clinical case studies by the presenter and audience members were shared throughout the talk.

Micki Juip and Paul M. Dake thanked everyone for attending and for all of their many contributions they provide in the workgroups.

The Full Member meeting was adjourned at 4:00 p.m. See Attachment A for a full list of handouts.

The next DPAC full member meeting is scheduled for May 1st, 2012 at the Radisson Hotel, Lansing.

APPENDIX A

The following handouts and support materials were provided as part of the participant packet:

- DPAC Full Membership Meeting Agenda – October 20, 2011
- MDCH Diabetes and Kidney Unit Update-presentation slides
- The Michigan Primary Care Transformation Project-presentation slides
- Type 2 Diabetes In-Country Vietnam Veteran Benefit handout
- Sleep and Diabetes: What is All the Fuss About-presentation slides
- 2010 MDCH Behavioral Risk Factor Survey
- 2011 DPAC Charter Suggested Revisions
- 2011-2014 Michigan Diabetes Action Plan (abbreviated version)
- 2011 DPAC Annual Membership Survey
- DPAC Prevention Workgroup Diabetes and Prediabetes Treatment Plan Recommendations
- DPAC Fall Newsletter
- “What is Evidenced-Based Practice?” (DaRE Workgroup Recommendation)
- MedPage Today “Guide to Biostatistics” (DaRE Workgroup Recommendation)
- DPAC Full Membership Meeting Evaluation Form
- DPAC Member List-Fall 2011
- DPAC Workgroup Contact List
- DPAC Nomination Form
- DPAC Full Membership Meeting Minutes – May 5th, 2011
- Kellogg Center floor plan