

MINUTES
ALABAMA DIABETES NETWORK (ADN) MEETING

September 21, 2011

The Alabama Diabetes Network meeting was held at the Montgomery Health Department located in Montgomery, Alabama. The following individuals were in attendance:

NETWORK MEMBERS	EX-OFFICIO MEMBERS (State Health Department Staff)
Daniel Allison Mike Bice Angelia Blackmon Dr. Evelyn Crayton Elizabeth Dean Michael Henderson Ruby Henley Lannie Sears-Mitchell Felicia Oji Dr. Mark Swanson Bradford Williams Kathy Zicarelle	Diane Beeson Debra Griffin Dr. Jim McVay Julie Nightengale LaMont Pack Melanie Rightmyer James K Reid Ellen Snipes GUEST SPEAKERS Kim Watkins Miriam Gaines

CALL TO ORDER/INTRODUCTIONS

Dr. Crayton called the meeting to order at 10:05 a.m. She greeted everyone and thanked them for attending the Network meeting. She recognized Dr. Swanson as co-chair of the Network and thanked him for representing her at the last meeting. Then she initiated introductions of all attendees.

APPROVAL OF MINUTES

Dr. Crayton brought attention to the minutes for the May 19, 2011, meeting and asked if there were no changes or additions, that the minutes be approved as written. A motion was made to approve the minutes as written. It was so moved and seconded.

UPDATES/BUSINESS SESSION

Jim McVay, Dr.P.A., Director, Bureau of Health Promotion and Chronic Disease, extended his appreciation to those in attendance and noted that this Network addresses diabetes and how it affects the community. He indicated that the impact of choices made and passed through families will be what decides the health of our communities. He suggested that changing behaviors of the communities now toward understanding diabetes would be to the betterment of future generations.

James K. Reid, R.N., B.S.N., M.S., *Director of Health Lifestyles Branch*, expressed his enthusiasm for his opportunity to integrate two programs--cardiovascular and diabetes units into the Healthy Lifestyles Branch. He stated the evaluation and Alabama action plans and processes are developed and in place. He then called on the Network members to help make it happen in the communities. A request from the audience for a copy of the Plan was answered by Ken who stated that it would be emailed to all Network members.

Lamont Pack, P.A., M.P.A., *Director, Diabetes Prevention and Control Program*, stated that the Diabetes Unit has placed ads in four newspapers during the month of September that focused on awareness of diabetes. The areas covered are Montgomery, Prattville/Millbrook, Wetumpka, and Tallassee. Mr. Pack then announced that the CDC recommended a new direction for the diabetes Network. The Network should work toward getting the Federally Qualified Health Clinics (FQHCs), cities, and communities more involved with intervention programs for the prevention and control of diabetes. He noted four areas of concern by the CDC: access to care, quality of life, education, and evaluation and communication. The specifics to these areas will be addressed in the subcommittee break-out sessions.

Dr. Swanson and Dr. Crayton stated they had met with Cardiovascular Health and Diabetes project officers of the CDC during their site visit in June 2011, and the project officers emphasized reaching the public, having positive outcomes, and measurable impact of intervention activities and that collaboration is a must. This theme was repeated throughout the visit. Both Dr. Swanson and Dr. Crayton expressed the need for everyone to work with each other to accomplish the Network's goals.

PRESENTATIONS:

Ms. Kim Watkins, *WalMart Market Health and Wellness Director*, informed the Network members that WalMart is very involved with the rural communities and wants to make a difference by educating and informing the public. To do this, WalMart has plans for a pilot study to be done in Northwest Alabama in addition to reducing the prices of medicines and equipment to meet the needs of not only diabetic patients but those with other chronic illnesses. Ms. Watkins also announced that WalMart has already partnered with some ADPH programs and hopes to provide health fairs and other monthly events at all stores that would benefit the rural communities. Both Melanie Rightmyer, ADPH Cardiovascular Unit, and Dr. Crayton suggested the use of the County Extension Services to provide cooking demonstrations during the health fairs. Ms. Watkins stated that she would be the contact person for those with questions about the new WalMart programs and distributed her business card to the audience. After Ms. Watkins presentation, Diane Beeson, Director, Statewide Tobacco Control, applauded WalMart for going smoke-free and asked if they would provide testimonials for use in legislative action to promote other businesses going smoke free, the quitline.com website, and the availability of nicotine patches. There are also plans to conduct surveys in parking lots, such as Walmart locations, to collect public opinions concerning smoking and its cessation.

Ms. Miriam Gaines, *Director of Nutrition and Physical Activity Division*, reviewed policy intervention in communities at the local level. The three focus levels for intervention are: nutrition, breast feeding, and physical activity. Ms. Gaines commented that the physical activity area was the easiest to introduce into a community. She referenced joint use agreements in communities and stated such agreements worked in lessening the barriers to achieving a successful goal. As a summary to her presentation, Ms.

Gaines emphasized the "make it fit" approach for each community to be successful in policy implementation changes in their areas.

CONVENING OF SUBCOMMITTEES

The subcommittees had an objective and a strategy to reach the objective. The objective for all was to develop ways to implement and evaluate various intervention programs in order to provide healthy lifestyles for Alabama citizens.

The Evaluation and Communication subcommittee had strategy 1: Determine key health care interventions for citizens to include ways to implement and evaluate processes and outcomes. Impact, as a result of the intervention, would be an integral part of the intervention.

The Education subcommittee had strategy 2: Determine types of professional education for the provider staff to include physicians. Included in the plan would be education delivery instruments, assessment of knowledge, and impact of new knowledge on delivery of health care to citizens.

The Access to Care subcommittee had strategy 3: Determine which policies to address to better improve the health care for people with diabetes to include the disparate population. Included in the plan would be education delivery instrument, assessment of knowledge, and impact of new knowledge for policy makers in the health care system, worksite, and legislature. Health care data capture and evaluation must be an integral part of the policy plan in order to sway opinions for improvement in health care.

The Quality of Life subcommittee had strategy 4: Determine ways to improve delivery of Diabetes Self-Management Education (DSME) to Alabama citizens. Included in this plan would be identifying individuals in need for DSME, reaching these individuals, and providing the education through community resources. Evaluation of impact is required.

The following are the results of the working subcommittees:

Access To Care:

Overview: Coordinate with WalMart, Publix, SARHA, and FQHCs to facilitate the dissemination of available information. Use "train the trainer" techniques in smaller communities. Partner with fire departments to provide health checks and referrals. Partner with churches in the development of bus programs. Conclusion: Barriers exist in access to medical advice/care, transportation issues, educational levels of those needing care, and compliance issues. Actions: Implement models of coordinators with local businesses, FQHCs, churches, and ADPH programs.

Quality of Life:

Overview: Discussed the need to develop strategies to educate population on lowering blood sugars, increasing/monitoring physical activity, encouraging partnerships with a variety of companies able to promote public educational sessions at times convenient to the public. Conclusion: Encourage healthy lifestyles. Actions: Attempt to educate consumers in a one on one atmosphere; promote all types of physical activities and include healthy cooking classes, advertise/educate public concerning discounted programs and products available in a variety of communities.

Education:

Overview: Create online education service using ADN speakers' bureau. Award CME credit hours through UAB to physicians that participate. Assist in making online services available in office locations for both physicians and patients to access. Conclusion: Contact UAB to establish credit hour approval/awards. Establish ways to monitor/edit information on the site. Actions: Work with UAB staff to create a web-based educational tool for physicians.

Evaluation and Communication

Overview: Need to identify which evidence based policy intervention the Network will implement. Options include—incentive programs; tax strategies to discourage use of foods and beverages of minimal nutritional value; establish joint use agreements with public schools to encourage physical activities. Conclusion: Determine how to collect and evaluate data from local levels to establish baseline data. Consider using ADPH programs and partnering with WalMart to obtain sample data from communities. Actions: Need list of preferred interventions; need a broader committee; use data from FQHCs to determine impact of policy interventions on a target population.

NETWORK FEEDBACK

Dr. Swanson called the group back to order and requested each subcommittee verbally review their initial plans with the group. Each subcommittee reviewed their plans and different items and views were discussed.

Acknowledgement/Adjourn was conducted by Dr. Swanson, when no further comments were given.

Respectfully submitted:



Debra Griffin, Nurse Educator/Coordinator
Diabetes Prevention and Control Unit



LaMont Pack
Director, Diabetes Prevention and Control Unit