

DIABETES PARTNERS IN ACTION COALITION ANNUAL REPORT FY10

October 1, 2009 - September 30, 2010



March 25, 2011

Dear DPAC Members,

We are pleased to provide you with the Diabetes Partners in Action Coalition's (DPAC) FY10 Annual Report, which reflects the many accomplishments that this coalition has achieved over the past year as well as the established priorities for the coming year.

DPAC is a volunteer partnership of like-minded individuals and organizations who work to reduce the impact of diabetes in Michigan. During the past year, the workgroups and committees built on the progress made in prior years to address prevention and control of diabetes in Michigan.

In October 2009, the Michigan Diabetes Action Plan, 2009-2011 was released. This plan was developed by the DPAC Board of Directors and its workgroups, with support from the Michigan Department of Community Health. This two year Action Plan lays out goals, measurable objectives, and specific activities for DPAC and partners. A copy of the Action Plan can be found on the DPAC website, www.dpacmi.org.

It has been an exciting year developing and implementing DPAC initiatives and diving into the Michigan Diabetes Action Plan objectives and activities. This year's Annual Report highlights selected accomplishments for FY10, results of the member survey, and identifies workgroup priorities in the coming year. In the past year, DPAC accomplishments include:

- Each of the five workgroups have completed at least one activity addressing selective objectives in the Michigan Diabetes Action Plan 2009-2011
- Held two successful full membership meetings that met the membership needs and priority areas (program outcomes, costs, and prevention) addressed in the prior membership survey
- The launch of the Diabetes Partners in Action Facebook page
- 12% of DPAC members participated in the annual Diabetes and Kidney Advocacy Day in Lansing
- Increased membership retention
- Creation and distribution of one translation brief on the use of the hemoglobin A1c as a diagnostic test
- Updated Prevention brochure
- Completion of diabetes and oral health and pregnancy and diabetes education project

DPAC is comprised of individual members and organizations that volunteer their time and resources to participate in this statewide coalition. A coalition is only as strong as the commitment of its membership. We are excited for you to see all of the work that has been achieved and hope that you will share this document with others in your organizations to promote the work that is done through DPAC. Thank you for the many contributions you and your organization have made furthering DPAC's mission this year.

Sincerely,



Peter Dews, MD
DPAC Board Co-Chair
Advantage Health Centers
Providence Hospital



Micki Juip, MA, BSN, RN, CDE
DPAC Board Co-Chair
Hurley Medical Center

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MEMBERSHIP

At the end of FY10, DPAC was comprised of 96 members including consumers, health care professionals, business/industry leaders, and many other sectors of our community. Thank you to all of the individuals and organizations who are members of DPAC for the time and resources that have been contributed to this volunteer-driven coalition.

Member organizations include:

ACCESS	Michigan Purchasers Health Alliance
Advantage Health Centers	MSUE Family and Consumer Sciences
American Diabetes Association	National Association of Social Work, MI Chapter
Amylin Pharmaceuticals	National Kidney Foundation of Michigan
Eli Lilly and Company	Novartis
Garden City Hospital	Novo Nordisk
Glaxo-Smith Kline	Oak Park YMCA
Great Lakes Medical Supply	Otsego Memorial Hospital
Greater Detroit Area Health Council	Pfizer Inc.
HealthPlus of Michigan	Prasher Law Group
Hurley Medical Center	Priority Health
INNOVEX	Providence Hospital
Johnson & Johnson Co.	REACH Detroit Partnership/CHASS
Juvenile Diabetes Research Foundation	Region 2 Area Agency on Aging
Mary Free Bed Rehabilitation Hospital	Sanofi Aventis
McLaren Regional Medical Center	St. Joseph Mercy Oakland Hospital
Kent County Health Department	St. Mary's Health Link
Merck and Co., Inc	Takeda Pharmaceuticals
MESSA	University of Michigan
Michigan Association of Health Plans Foundation	UPDON
Michigan Association for School Nurses	Up Hill Solutions
MDCH Bureau of Epidemiology	Wayne State University
MDCH Cardiovascular Health Section	Western Michigan University
MDCH Diabetes & Other Chronic Diseases Section	Without a Vision the People will Perish
MDCH Genomics and Birth Defects	
MDCH Oral Health Program	
MDCH Medicaid	
MDCH Tobacco Section	
Michigan Diabetes Research & Translation Center	
Michigan Dietetic Association	
Michigan Organization of Diabetes Educators	
Michigan Optometric Association	
Michigan Pharmacists Association	
Michigan Primary Care Association	

EXECUTIVE SUMMARY

This Annual Report provides an update on the diverse DPAC activities and objectives from October 1, 2009 to September 30, 2010. This report includes the review of workgroup progress, Board priorities, and overall efforts to prevent and control the impact of diabetes in Michigan.

During the past year, DPAC has been instrumental of the implementation of the Michigan Diabetes Action Plan. The first of a two year plan, the plan identifies goals, objectives, activities, and partners to address diabetes prevention and control in Michigan. DPAC conducted four Board Meetings and two Full Membership Meetings. There are continued enhancements of the DPAC website (www.dpacmi.org) and a recently launched Facebook page to expand its social media reach. DPAC has been able to continue its collaborations with its essential partnerships and cultivate new member participant and organization relationships.

This year has not been without its challenges. Economic hardships continue to impact Michigan unemployment and economy. Even though state funding of the Michigan Diabetes and Kidney line was maintained, many coalition partners experienced challenges in reduced funding, programming, and the ability to deliver the same level of services. A coalition is as strong as its membership and statewide economic challenges and reduced resources can affect DPAC membership, participation, regional influence, and implementation of DPAC initiatives.

DPAC added six new members to its membership. The annual Membership Survey was distributed and yielded a 41% response rate (this includes those who answered the online survey and a follow up telephone non-responders survey). Overall, the members reported being active in a workgroup (92%) and attending the Full Membership Meetings (85%). Online survey participants reported they valued DPAC for the networking opportunities, news updates, and being part of the “greater good” in increasing diabetes awareness across Michigan. Lessons were learned regarding modifying the process of how the Membership Survey is conducted and the importance to connect relevant DPAC initiatives to the Michigan Diabetes Action Plan.

Other DPAC Updates:

- The dissolution of the Membership Committee with committee duties folded into the DPAC Board.
- The Advocacy and Public Policy Workgroup participated in another successful Diabetes and Kidney Advocacy Day and kept DPAC members up-to-date on pending and/or active legislation.
- The Communication and Public Awareness Workgroup distributed messages on the DPAC website, Facebook page, quarterly newsletter, press releases, and established new venues for the DPAC Exhibit board.
- The Data, Research, and Evaluation (DaRE) Workgroup provided feedback on the MDCH Michigan Diabetes Fact Sheet and produced one translation brief.
- The Prevention Workgroup updated its prevention brochure and contributed articles in the areas of diabetes prevention in children and prevention and sleep.
- The Training and Education Workgroup completed its oral health and diabetes and pregnancy and diabetes project.

ABOUT DPAC

Mission

To provide statewide leadership to prevent and control diabetes and reduce its impact in Michigan

Vision

Through active collaboration, DPAC has mobilized resources to ensure a unified course toward the reduction of diabetes and its complications in Michigan.

Coalition Structure

DPAC has a board of directors that meets quarterly to address overarching issues and to facilitate communication between workgroups. There are five workgroups that meet approximately once a month, usually via conference call: Advocacy and Policy; Communication and Public Awareness; Data, Evaluation and Research (DaRE); Prevention; and Training and Education Programs. DPAC also has a standing Membership committee. Governance issues are addressed by the leadership team and the Board.

Michigan Diabetes Action Plan

The 2009-2010 Michigan Diabetes Action Plan establishes a unified course of action to help reduce the increasing prevalence and impact of this disease. The Michigan Diabetes Action Plan has provided the template for DPAC FY 10 activities and accomplishments. In addition to contributing to the development and implementation of the statewide action plan, workgroups have developed their own work plans in conjunction with the goals laid out in the action plan. The Michigan Diabetes Action Plan and individual DPAC Workgroup annual work plans are reviewed and monitored for progress.

Preliminary work has been accomplished on the next action plan installment, the 2011-2014 Michigan Diabetes Action Plan. The MDCH Diabetes Prevention and Control Program, key stakeholders and DPAC representatives, (including workgroup staff leads, Board Members, and general members) have participated in two strategic planning sessions held in the later part of the year. DPAC will continue to play a prominent role in the development and implementation of the next Michigan Diabetes Action Plan.

SELECTED ACCOMPLISHMENTS FOR FY10

Working together to further the Michigan Diabetes Strategic Plan, DPAC and its member organizations have made significant progress toward achieving our goals.

Governance

- Implemented and reviewed all DPAC activities in accordance to the Michigan Diabetes Action Plan overall goals and objectives.
- Assisted workgroups in developing annual work plans to implement objectives and activities for their focus area.
- Approved the revision of the DPAC General Member Position Description
- Approved to fold the Membership Committee into the Board in June 2010.
- Participated in the planning of the installment of the 2011-2014 Michigan Diabetes Action Plan.
- Began search process for the new DPAC Co-Chair
- Planned and implemented two DPAC Full Membership meetings which included a training component, a workgroup meeting opportunity, and networking opportunities.

Membership Committee (October 2009 –June 2010)

- Maintained membership, including six new members, for a total of 96 active DPAC members. Updated member list to reflect only active members.
- Provided a DPAC orientation session for new and returning members at general membership meetings and provided follow-up calls to new members participating in these sessions.
- Revised the general member position description and Membership Committee Charter.
- Recommended the membership duties be folded into the DPAC Board.

Advocacy

- Contacted employer and business organizations and provided a copy of the DPAC Diabetes and Care Management Report.
- Promoted and participated in the 2010 Diabetes and Kidney Disease Advocacy Day; Of the 100 total participants, 12 participants (12%) were DPAC members.
- Developed and disseminated a legislative advocacy document that provided information on diabetes and kidney disease and positive outcomes from state funded prevention and disease management programs.
- Shared updates on pending and/or active legislation (federal and state) related to diabetes.
- Partnered with MDCH and asked the Michigan Department of Education (MDE) to revise the MDE “Management of Students with Diabetes in the School Setting” memorandum. MDE agreed and the workgroup is collaborating with MDE and key stakeholders and on the memorandum revision.

Communication and Public Awareness

- Wrote and disseminated four quarterly newsletters

- Presented the DPAC Exhibit at the following events: JDRF Annual Conference, Saginaw Chronic Disease Self Management Health Fair, MDCH Lansing Immunization Conference, MODE, two NKFM events and WISEWOMAN.
- Collaborated with the Advocacy Workgroup on the DON Key Informant article and Letter to the Editor campaign
- Promoted diabetes awareness through PSA's, letters to editor, and monthly press releases distributed by NKFM.
- Created the DPAC Facebook page (including Facebook 101 instructions) and maintained the DPAC website. The website features many new additions, including a highlights page and media page.
- Prepared materials in preparation for the World Diabetes Day and the National Diabetes Awareness Month in November. Materials included governor proclamation, newsletter, online promotion.

Data, Research and Evaluation (DaRE)

- Provided review and feedback of the Michigan Diabetes Fact Sheet.
- Wrote one translation brief on the use of the hemoglobin A1c test and diagnosing diabetes and worked on two briefs: 1) Sleep and Diabetes 2) a new review of the ACCORD study
- Collaborated with the Prevention Workgroup on their sleep article
- Decided on additional translation brief topics, including cost analysis and an overview of evidenced base programming.

Prevention

- Updated and printed prevention brochure
- Completed sleep and prevention article in collaboration with the DARE workgroup
- Wrote prevention and children article for the Fall DPAC newsletter
- Participated in strategic planning of Healthy Weight Partnership to complete the Michigan Healthy Eating and Physical Activity 10 Year Plan
- Working on revising the Diabetes and Prediabetes Treatment Plan

Training and Education Programs

- Completed the Diabetes and Oral Health and Diabetes and Pregnancy projects and list of materials on the DPAC website.
- Decided next project will be on health literacy. The workgroup reviewed many materials and will be combining a list of health literacy materials for diabetes health care professionals. Dissemination will be in FY 11 DPAC meeting and promotion on the DPAC website.
- Promotion of PATH in the DPAC Spring Newsletter and DPAC meetings
- Continued work with oral health and MDCH diabetes educational module.

MEMBER SURVEY RESULTS

Since 2008, DPAC has distributed an annual online survey to its membership to obtain feedback for the past year and directions for the next year. This year's survey focused on member activities, member engagement, dissemination of DPAC materials, and interest in regional coalitions.

There were 32 responses to the survey, which meant that roughly 33% of the membership responded. This was less than the desired 50% response rate. So, an additional telephone non-response survey was also undertaken to try to understand the reasons for the drop in response this year. An additional 7 members completed the non-response survey. Since the combined total was still only a 41% response rate, it is difficult to generalize responses to the entire DPAC membership.

The primary reasons stated for not completing the online survey were simply forgetting or lack of time. Another interesting finding was that there were more people who were called for the non-response survey that believed they had completed the online survey than there were numbers of anonymous online surveys completed. To attempt to increase future response rates, DPAC will plan to distribute the membership survey during the fall Membership Meeting. Members who cannot attend will receive an invite to participate in the survey online after the meeting.

Those who completed the online survey have been members longer, on average, than those who did not complete the online survey. Members who completed the non-response survey differed in their responses from the members who completed the online survey. They were less likely to understand their role in DPAC and less likely to feel engaged. However, people overall felt they were valued members of DPAC. These results lead us to conclude that while newer members see value in DPAC, they may not have a clear idea how they can contribute. DPAC leadership may need to consider new ways to incorporate the interests of and involve newer members.

Members who answered the online survey overwhelmingly value DPAC for the opportunity to network with other leaders in diabetes care and prevention. The distribution of news updates and other information was also valued by over half who answered. Other common answers to the benefit of DPAC included being a part of "the greater good" and being able to increase diabetes awareness in the state.

Overall, most members reported being active in a workgroup (92%) and attending the Membership Meetings (85%). Half of the responding members also report participating in a workgroup activity or Advocacy Day. However, a relatively low percent (28%) of respondents were able to name a specific activity from the Action Plan that had been completed. This may indicate DPAC members need to be able to connect DPAC workgroup activities to the Michigan Diabetes Action Plan or the membership may need to have a better awareness of DPAC accomplishments.

In general, it appears as though members are making a better than average effort to distribute DPAC resources into their organizations and communities (Table 1). Most respondents are distributing more than one type of DPAC resource.

Table 1. Combined responses of the online survey and non-response survey (N=39) for dissemination of DPAC resources.

List of DPAC Resources in Surveys	Count	% of Respondents
Translation briefs (from DaRE workgroup)	7	18%
DPAC newsletter	23	59%
DPAC updates	21	54%
DPAC FY09 Annual Report	5	13%
Michigan Diabetes Fact Sheet	29	74%
Michigan Prediabetes Fact Sheet	21	54%
Prediabetes consumer brochure	12	31%
Prediabetes and Diabetes treatment plan	11	28%
Michigan Diabetes Action Plan	15	38%
Michigan Tribal Plan	2	5%
Materials from exhibitors at DPAC meetings	18	46%
Other (NDEP, statistical presentations, website, membership info, other workgroup handouts)	6	15%

To prioritize topics for future presentations, translation briefs, and fact sheets, we asked members to provide information on the topics for which they would be interested in additional information. Based on the frequency of response, the following topics and themes were identified as priorities for the coming year:

- Share best practices, successful community projects, research from in-state universities, and successes in other states.
- Lifestyle change strategies for primary prevention and to reduce health disparities.
- Cost-effectiveness of programs and how to reduce program costs.
- Updates to treatment guidelines
- Health literacy

While these topics will be given priority consideration, all responses given will be shared with DPAC leadership for use during event planning.

All of the data collected through this survey will be used to establish Board priorities, workgroup activities, and topics of interest for the full membership meetings. DPAC will continue to work with members to increase the distribution of information and resources to their colleagues and to consumers. Based on the feedback on the survey, these findings will be used to determine the type of materials (including subject and format) for future dissemination efforts. To improve the overall experience of DPAC membership, the Board will continue to work with members to identify meaningful activities, maintain engagement, and instill a sense of accomplishment in attaining our stated goals and objectives.

A survey was distributed to all DPAC members in October 2010 to collect information from membership on their engagement, topics of interest, and to determine the extent to which members are distributing materials developed and disseminated. The survey was developed and analyzed by the Data, Research and Evaluation (DaRE) workgroup using Survey Monkey.

DPAC PRIORITIES FY11

Working together to provide statewide leadership to prevent and control diabetes and reduce its impact in Michigan DPAC and its member organizations will achieve the following goals for each workgroup as identified in the Michigan Diabetes Action plan:

Primary Prevention

- ❖ Prevent and delay the onset of diabetes by promoting diabetes and prediabetes screening, weight loss, improved nutrition, and increased physical activity among Michigan residents.

Communication and Public Awareness

- ❖ Develop and implement a statewide communication plan and an ongoing public awareness campaign about diabetes.

Advocacy and Public Policy

- ❖ Enhance diabetes-related advocacy and policy efforts by fostering and coordinating activities among organizations that advocate for people with diabetes and kidney disease to address state and federal policy priorities
- ❖ Ensure that all people with diabetes have access to self-management training, supplies and health care.
- ❖ Reduce health disparities among high-risk, racial and ethnic groups and other special populations.

Data, Research and Evaluation

- ❖ Increase the knowledge of health care providers and professional organizations regarding the impact of diabetes and evidence-based programs to improve the quality of diabetes care.

Training and Education Programs

- ❖ Increase the level of evidence-based clinical knowledge among diabetes service providers.

Please see the *Michigan Diabetes Action Plan* (<http://www.dpacmi.org>) for impact statements, objectives and activities that are delineated for each of these goal areas.



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