

Community Health Needs Assessment Implementation Plan 2017-2019

Advocate Trinity Hospital

Date Created: May 2017

Date Reviewed/Updated:

PRIORITY AREA: Chronic Disease – Diabetes

GOAL: To reduce the incidence of diabetes among adults 18+ in the South Shore (60619) and South Chicago (60617) community areas.

LONG TERM INDICATORS OF IMPACT

	Baseline Value, Date and Source	Frequency
1. Reduce age-adjusted Emergency Room (ER) rates due to Diabetes in adults 18+ years in zip codes 60617 and 60619	Zip code 60617 <u>51.7</u> ER visits/ 10,000 population Zip code 60619 <u>60.4</u> ER visits/ 10,000 population; Healthy Communities Institute (HCI), Illinois Hospital Association (IHA), COMPdata, 2013-2015	Annual
2. Reduce age-adjusted hospitalization rates due to diabetes in adults 18+ years in zip codes 60617 and 60619	Zip code 60617 <u>49.0</u> ER visits/10,000 population Zip code 60619 <u>56.8</u> ER visits/10,000 population; HCI, IHA, COMPdata, 2013-2015	Annual

STRATEGY #1: Trinity Hospital will engage a lifestyle coach to implement the Centers for Disease Control and Prevention’s (CDC) National Diabetes Prevention Program (DPP) in partnership with community-based organizations (CBOs) and faith communities in zip codes 60617 and 60619.

TYPE Long-lasting Protective Interventions; Counseling and Education

PARTNERS: Centers for Disease Control and Prevention, community-based organizations, faith communities

BACKGROUND ON STRATEGY

Evidence of effectiveness: Evidence of effectiveness: Diabetes is a chronic, life-altering disease with complications that can drastically impact both quality of life and life expectancy. In 2002, the Diabetes Prevention Program Research Group completed the Diabetes Prevention Program study—a large, randomized clinical research study.

Results of the study showed that at-risk individuals who lost a modest amount of weight and got at least 30 minutes of moderate physical activity a day (such as brisk walking), five days a week, cut their chance of developing Type 2 Diabetes by as much as 58 percent. At-risk individuals who were over the age of 60 and did so reduced their risk even more—by as much as 71 percent. The National DPP www.cdc.gov/diabetes/prevention/ (click here) was developed based upon the findings of the Diabetes Prevention Program study.

www.cdc.gov/diabetes/prevention/ (click here)

www.nejm.org/doi/full/10.1056/NEJMoa012512 (click here)

SHORT TERM INDICATORS			
Process Indicators	Annual Targets by December 31		
	2017	2018	2019
1. Number of DPP programs offered	1 program	2 programs	3 programs
2. Number of participants enrolled in the DPP program	12-20 participants	12-20 participants	45 participants
3. Number of CBOs or faith organizations partnered with to host the DPP program	1 partner	2 partners	3 partners
4. Percentage of participants who attend 9 of the 16 sessions held in the first 6 months	75% of participants	80% of participants	85% of participants
5. Percentage of participants eligible for the program based on their A1C level (CDC standard, 50%)	50% of participants	50% of participants	50% of participants
Impact Indicators	2017	2018	2019
1. Percentage of participants who achieved 5% body weight reduction within 12 months (CDC comparison 58%)	55% of participants	55% of participants	60% of participants
2. Percentage of participants who self-report at least 150 minutes weekly of moderate physical activities post program	75% of participants	80% of participants	85% of participants
3. Percentage of participants with decreased A1c levels post program	50% of participants	50% of participants	50% of participants

STRATEGY #2: Establish Trinity Hospital as a designated diabetes prevention program approved site.	TYPE Long-lasting Protective Intervention
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PARTNERS: Faith based organizations, Centers for Disease Control and Prevention

BACKGROUND ON STRATEGY
Evidence of effectiveness: According to the Centers for Disease Control and Prevention, approximately 86 million Americans age 20 and older (37%) have prediabetes. The CDCs Diabetes Prevention Recognition Program is designed to recognize organizations that have demonstrated their ability to effectively deliver a proven Type 2 Diabetes prevention lifestyle intervention. Lifestyle change programs offered through the DPP program can reduce the risk of developing Type 2 Diabetes by as much as 58%.

SHORT TERM INDICATORS			
Process Indicators	Annual Targets by December 31		
	2017	2018	2019
1. Submit Diabetes Prevention Program application to CDC	Summer 2017	N/A	N/A
2. Develop timeline for program implementation	Summer 2017	N/A	N/A
3. Begin DPP program implementation	Summer 2017	Ongoing	Ongoing
4. Receive pending approval status from CDC	Summer 2017	Summer 2018	N/A
5. Implement data collection plan	Summer 2017	N/A	N/A

Impact Indicators	2017	2018	2019
1. Achieve recognition as a CDC Diabetes Prevention Program approved site	N/A	Summer 2018	N/A
2. Percentage of participants who achieve 5% body weight within 12 months (CDC comparison 58%)	55% of participants	55% of participants	60% of participants
3. Percentage of participants who self-report at least 150 minutes weekly of moderate physical activities	75% of participants	80% of participants	85% of participants
4. Percentage of participants with decreased A1c levels post-program	50% of participants	50% of participants	50% of participants

STRATEGY #3: Increase awareness of prediabetes in faith communities in 60617 and 60619 by collaborating with clinical diabetes education team to offer health education.	TYPE: Counseling and Education
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PARTNERS: Trinity Care Managers, Trinity Diabetes Educator, faith based organizations

BACKGROUND ON STRATEGY

Evidence of effectiveness: According to Gopalan, Anjali et al., studies have demonstrated the benefit of weight loss and physical activity for diabetes prevention among those with prediabetes. Results from the study show that prediabetes-aware adults have increased odds of engagement in physical activity and weight management. Increasing patients' awareness of prediabetes may result in increased performance of exercise and weight management behaviors and most importantly, decreased risk of future diabetes.

[http://www.ajpmonline.org/article/S0749-3797\(15\)00124-5/abstract](http://www.ajpmonline.org/article/S0749-3797(15)00124-5/abstract), (click here) [Boltri et al.](#), (click here) conducted a Translation of the National Institutes of Health Diabetes Prevention Program in African American churches study. The objective of the study was to translate the Diabetes Prevention Program (DPP) for delivery in African American churches. Two churches participated in a 6-week church-based DPP and 3 churches participated in a 16-week church-based DPP, with follow-up at 6 and 12 months. The primary outcomes were changes in fasting glucose and weight. Translation of DPP can be achieved in at-risk African Americans if research teams build successful community-based relationships with members of African American churches. The 6-session modified DPP was associated with decreased fasting glucose and weight, similar to the 16-session program, with lowered material costs for implementation. <https://www.ncbi.nlm.nih.gov/pubmed/21671523> (click here)

SHORT TERM INDICATORS

Process Indicators	Annual Targets by December 31		
	2017	2018	2019
1. Number of community partners engaged in hosting pre-diabetes awareness education sessions	5 partners	10 partners	15 partners
2. Number of prediabetes awareness sessions conducted	5 sessions	10 sessions	15 sessions
3. Number participants who attend pre-diabetes awareness sessions	50 participants	70 participants	100 participants
4. Number of participants referred to the CDC Diabetes Prevention Program	10 participants	18 participants	30 participants
Impact Indicators	2017	2018	2019
1. Percentage of participants with increased knowledge of how nutrition impacts diabetes as indicated on pre- and post-test	80% of participants	80% of participants	80% of participants
2. Percentage of participants who demonstrate two ways to prevent diabetes as indicated on pre- and post-test	80% of participants	80% of participants	80% of participants

ALIGNMENT WITH COUNTY/STATE/NATIONAL PRIORITIES			
Strategy	County IPLAN	SHIP (State Health Improvement Plan)	Healthy People 2020
1-3	Participants at the January 21, 2016, WePLAN Community Health Partner Committee meeting worked together to identify priority health issues for the community health improvement plan of WePLAN2020. Chronic disease was selected as one of the priorities.	SHIP 2021 identified chronic disease, including diabetes, as one of the health priorities for the state. The SHIP supports the Complete Streets recommendation that encourages walking as a measure to reduce diabetes.	Healthy People 2020 has identified several objectives for the prevention of diabetes. Examples include: "Reduce the annual number of new cases of diagnosed diabetes in the population," and "Increase prevention behaviors in persons at high risk for diabetes in the population."

Advocate Trinity Hospital has developed this implementation plan to meet a prioritized need identified through a community health needs assessment process. The hospital may refocus resources if necessary to best address the needs of its community.