

Waterloo-Wellington Diabetes Regional Coordination Centre

Volume 2

March 15th, 2011

Special points of interest:

- Central Intake will enable stronger data collection
- Overcoming barriers to self-management
- Partnering with the mental health community
- Utilizing best practices to manage and improve diabetes care

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Inventory of Services – Diabetes Education Programs

Thank you very much to all the diabetes education programs providing diabetes services in the WWLHIN for completing our initial survey. The information provided has given us a better understanding of the landscape or care.

There are currently 18 programs providing diabetes education services in the Waterloo-Wellington Local Health Integration Network (WWLHIN) servicing 21 sites across the geography. The programs are located in FHT's, Hospital's, CHC's and pharmacies.



Currently, there are 18.5 diabetes teams providing education and support to approximately 10,000 patients.

Table 1 illustrates the response rates for diabetes services offered by each program. Further analysis of the diabetes service description indicates that a small number (6/16) of programs often initiate insulin.

There were some challenges in the analysis and interpretation of this inventory:

- There was very little consistency in the way that diabetes services collect data
- Some results must be interpreted with caution as they do not reflect the real diabetes program/services structure
- It was difficult to obtain data on numbers of clients receiving diabetes service (16 out of 20 organizations were only able to provide approximate #s)

This inventory clearly illustrates the needs for standardized data collection and for carefully designed tools that capture the characteristics of diabetes services

We have expanded our inventory of service to include pharmacies, primary care providers, foot care providers and optometrist/ophthalmologist enabling us to have a clearer picture of the diabetes services provided and needed in our region.

Table 1: The Diabetes Services Offered:	%	#
Secondary prevention that mainly focuses on education for adults with T2 diabetes	77.8%	14
Secondary prevention that includes education, management and insulin for adults with T2 diabetes	66.7%	12
Primary prevention and awareness (general population)	50.0%	9
Education and management of T1 and complex T2 diabetes	50.0%	9
Screening of populations at high risk of T2 diabetes	44.4%	8
Education and management of gestational diabetes	33.3%	6
Education and management of T1 and T2 diabetes with pregnancy	16.7%	3

Stand up to Diabetes

Mental Health Peer Support Workers to Be Trained in Diabetes Prevention and Self-Management



This project will increase the skills of mental health peer support workers in providing support.

A diabetes peer support training module will be developed and pilot tested by peer support trainers across Ontario. The module will be one of a series of specialty modules that will build on a mental health peer support worker core skills training program cur-

rently being developed by Ontario Peer Development Initiative (OPDI). The diabetes training module will then be revised and distributed provincially as a stand-alone resource for training mental health peer support workers delivering peer support in any setting.

Further to the announcement in June last year the first wave of training has

taken place with a handful of participants being trained. In follow-up with CMHA, no one in our LHIN has taken part in the training, but we should have leads in our area by the end of April.

Self-Management Project – Funded Through the Ontario Diabetes Strategy

New funding has just been received from the Ontario Diabetes Strategy, to support a self-management project for Waterloo-Wellington. This project will be aligned with the RCC to coordinate self-management programs throughout the Waterloo-Wellington LHIN.

The role of the self-management project is to coordinate and provide self-management education and skills training to individuals with or at-risk of diabetes. The project also supports self-management training for health-care providers to enhance their skills in motivational interviewing, behavioural change strategies and self-management concepts.

Several existing programs meet the established standard of training (eg. Stan-

ford Chronic Disease Self-Management Program and Living with Stroke program) and will continue to be supported and enhanced through this funding. An inventory of programs offering such programs is currently being collected.

Recognizing that diabetes educators have a great knowledge of not only diabetes, but also of self-management skills necessary to bring about healthy outcomes, additional programs will be offered to build on their skill set, such as a program offered by Dr. Michael Vallis. As Vallis states, "Diabetes healthcare providers are no strangers to the self-management model. Indeed, it could be said that diabetes is the field in which the self-management model has been most thoroughly



developed and implemented. The marriage of expert clinical care with self-management by the individual is an ideal union and an increasingly common objective".

If interested in the self-management coordinator position, recruitment for this position is currently underway. Please contact the RCC at 519-653-1470 #255 if interested.

"Diabetes healthcare providers are no strangers to the self-management model. Indeed, it could be said that diabetes is the field in which the self-management model has been most thoroughly developed and implemented"

Centre for Addiction and Mental Health (CAMH) Education Needs Assessment 2011



In an effort to identify education needs, trends and future opportunities, CAMH is conducting a brief 16 question survey. CAMH highly value your input and would appreciate it if you could take 5 minutes of your time to answer the questions

The survey is now open and will close Friday, March 25th, 2011. Please click on the following link to take the survey:

http://www.surveymonkey.com/s/CAMH_2011_Education_Survey

Starting with Central Intake / Increasing Efficiency

The first wave of centralization has begun in the Kitchener/Waterloo and Cambridge region with educators coming together to develop a common referral form and triage process. The aim of this project is to have a central intake for referral within each region.

We are excited to have this task force well underway as it is crucial to system design and will help us build and maintain capacity.

Central intake will provide a streamline process for intake and triage of referrals for diabetes education and management allowing easy navigation of the system. It will

also enable stronger data collection allowing us to better monitor wait times. This will then determine if there are workflow and technology changes that can be made to simplify booking of patients in programs and to reduce the variability in wait times for diabetes education across the region.

1-855-342-2387 (DIABETS)

“Central intake will enable a streamline process for intake and triage of referrals ”

Common Medical Directives

We had our first task force meeting to discuss common medical directives for the Waterloo-Wellington region.

In order to provide the best possible care directives are needed to enable the diabetes education team to assess and make treatment decisions.

It was felt by the task force that we need medical directives for the following activities; ordering supplies, blood work, skin prick (RD), adjusting insulin and oral medications, and initiating insulin therapy.

As we move forward with developing these directives we are going to have to

overcome the following hurdles - developing competency models, ensuring an extensive dissemination process, and determining review and sign-off protocols.

It's a big task, but hey you got to start somewhere!



Baseline Diabetes Dataset Initiative

The second wave of BDDI validation lists were sent out this quarter to encompass family physicians who have yet to participate, CHC physicians and Nurse practitioners.

We hope you have enjoyed reading this newsletter, as it provides an opportunity to update you on some of the activities of the RCC. As you have read, we have been focusing on our inventories, stake-holder meetings and task force meetings to develop a good understanding of the diabetes landscape

Stand up to Diabetes

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in the Waterloo-Wellington LHIN, so that we can effectively develop our short and long-term workplans.

Working within the Chronic Disease Prevention and Management (CDPM) framework, we are working with all four components of the framework.

"Delivery System Design": Feedback from our inventories and discussions indicate there is a strong desire for a system that is easy to navigate for both individuals with diabetes and health-care providers. Work is well underway with the central intake.

"Personal skills and self-management support": The funding received will allow us to develop a more coordinated approach to self-management.

"Provider decision support": We are offering an educational event in May, as well as looking at regional initiatives such as the common medical directives.

"Information systems": we are encouraging uptake of the BDDI, as well as developing common data-collection tools to ensure consistent reporting.

Please continue to stay in touch and offer any suggestions you may have. Thank you to everyone for your guidance and support.

Sincerely,

Debbie Hollahan
Director, Waterloo-Wellington
Diabetes RCC

Diabetes Educator Networking Day

Wednesday, May 11th we are meeting again to update you on our activities and to provide you with a unique learning opportunity. The objective of the meeting is to provide you with new tools and the steps to take to help your patient get the help they need.

SNEAK PEAK - Tentative Agenda

- Wound Care—Assessments and Treatments
- Mental Health—Screening and Referring
- Bariatric Surgery—The Diet and Referral Process
- Diabetic Peripheral Neuropathy
- Dental Care—New Resources

Plus educational booths from industry partners Pfizer, Novo Nordisk, iMD Health, Merck, Eli Lilly, BMS/Astrazeneca, Sanofi-Aventis, Bayer, Heart and Stroke Foundation and Public Health (Smoking Cessation)

**WATERLOO-WELLINGTON
REGIONAL DIABETES
COORDINATION CENTRE**

You are invited to attend the following continuing education event.

We hope the planned sessions will provide you with the tools and strategies to utilize best practice to manage and improve diabetes care within your team.

Delving deeper into the complications of diabetes and discovering new tools for screening and education

Taking a practical approach to diabetes management

**WEDNESDAY, MAY 11th
8:00AM - 4:00PM
BINGEMAN'S CONFERENCE CENTRE
425 BINGEMAN'S CENTRE DRIVE,
KITCHENER, ONTARIO**

Please register by April 15th to Roberta Irvine at 519.653.1470 x255 or Email robertai@langos.org

Stand up to Diabetes