

Building Partners-One Educator, One Site at a Time

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Submitted: 29 Nov 2018; **Accepted:** 07 Dec 2018; **Published:** 20 Dec 2018**Guiding Principle**

The increasing prevalence of type 2 diabetes and cardiovascular disease compromises the health of all communities in Wyoming. Previous studies suggest that the prevalence of obesity and diabetes is higher in rural areas compared to urban communities¹. Educating people on how to prevent diabetes may significantly reduce the risk for people who have prediabetes or are at risk for developing type 2 diabetes.

United States Diabetes Facts²

- Total: 30.3 million people have diabetes (9.4% of the total population)
- Diagnosed: 23.1 million people
- Undiagnosed: 7.2 million people (23.8% of people with diabetes are undiagnosed)

Prediabetes Fast Facts²

- Total: 84.1 million people 18 years of age or older have prediabetes (33.9% of the total population)
- 65 years or older: 23.1 million adults aged 65 years or older have prediabetes

Wyoming

- According to the Centers for Disease Control and Prevention, 2 Wyoming's incidence of diabetes in adults is 7.6% or 44,544 people (2015).
- Therefore Wyoming's potential incidence of pre-diabetes could reach 139,494 people at risk of developing Type 2 Diabetes.

Purpose

To prepare Wyoming for the implementation of National Diabetes Prevention Programs, the Wyoming Chapter of the American Association of Diabetes Educators (WyADE) investigated the implementation of Lifestyle Coach Training programs in our frontier and rural state.

Background

In May of 2017, WyADE members gathered during their state annual meeting in Riverton, Wyoming to discuss topics related to the Centers for Medicare and Medicaid Services pending coverage of diabetes prevention education. A key component of the National Diabetes Prevention Program (NDPP) is the implementation of lifestyle change programs aimed at preventing or delaying the onset of type 2 diabetes. The NDPP utilizes Trained Lifestyle Coaches to

assist participants in achieving and maintaining positive lifestyle behavior change. The program provides education and support to qualified attendees focused on healthy eating, incorporating greater than 150 minutes of physical activity into daily life, and the use of tools and skills to cope with stress. The Centers for Disease Control and Prevention³ provides the framework, including resources, guidelines and research based standardized curriculum for these programs.

Discussion

Wyoming is included under Region VIII, the Denver Office of Health Resources & Service Administration (HRSA), to whom WyADE reached out for assistance and support. Additionally, WyADE was referred by the American Diabetes Association to their Master Trainers from the Denver office for help and guidance. Both the American Diabetes Association and HRSA were invited to attend the WyADE annual meeting; their input and insights were greatly appreciated by our members.

There were many logistical concerns to include not only training a projected 60 Lifestyle coaches needed to meet our expansive rural area, but in securing the services of a nationally certified master trainer. Through collaboration and partnerships, these barriers were overcome. At the time of the May 2017 WyADE conference, there were two NDPP pilot sites and four Certified Lifestyle Coaches. New Life Style Coaches would be generated from both the public and private community-based health care setting; to include diabetes care centers, public health, primary care, Tribal and Indian Services and veteran health care clinics.

Conclusion

Our findings validate the feasibility of implementing regionally based training programs for our educators. The development of a collaborative partnership with the Montana State Diabetes Program and their master trainer was recognized as the most effective, sustainable method in meeting the new national diabetes prevention program Lifestyle Coach certification guidelines.

Building Partners

Following the conference, the WyADE executive board began an outreach to our region VIII partners to assess current available resources. Along the northern border of Wyoming sits the state of Montana, who in 2008, through the Montana Diabetes Control Program within the Montana Department of Health and Human

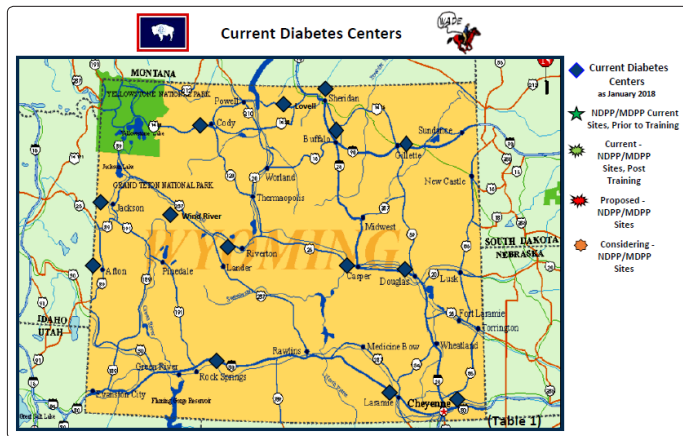
Services participated as one of the original pilot CDC sites for the DPP intervention. Their two Diabetes Training and Technical Assistance Center master trainers could, under a cooperative agreement, provide Lifestyle Coach training in Wyoming.

Additionally, the Wyoming Diabetes Prevention and Control Program, a Division of the Wyoming Health Department, did make available grant funds for Training.

A grant application was initiated to assist in training, implementation and to reduce participant tuition. Our local Critical Access partners supported the effort by making professional development funds available to hospital and clinical staff to further expand participation and reduce the burden of tuition for training. These grant applications were developed for distribution as sites were identified and initiation dates determined.

WyADE’s work group and both the Montana and Wyoming Health Divisions, worked collaboratively to oversee the availability of master trainers and training sites. The first training session was scheduled for August 2017.

Wyoming established 13 Diabetes Education Centers (Map 1) tasked with bridging large geographic areas and communities. While the health care needs of Wyoming’s less-populated areas are served by independent critical access hospitals and clinics, many communities remained unserved. Thus, a more comprehensive educational strategy was clearly required.



Concurrently, WyADE’s educational coordinator explored the possibility of providing continuing education credits through the American Association of Diabetes Educators national education department for Lifestyle Coach training and an application for CE was submitted and approved in July of 2017.

Under a collaborative agreement, recruitment for sites to deliver NDPP was initiated in late May, 2017. All current Wyoming and Montana Diabetes Centers, Public Health facilities, Indian Health Services, Tribal Health, and Critical Access facilities were eligible to participate, and, prospective Lifestyle Coaches came from several disciplines and communities across both these frontier states.

Gathering in Casper to facilitate reduction of travel, the first 23 educators began their Lifestyle Coach journey. Assisted by WyADE Leadership4, Master Trainer Liane M. Vadheim, RD, LN, CDE5, began the inaugural class. The overwhelmingly positive class

evaluations resulted in an increased demand for trainings and additional dates where scheduled. Our second class successfully graduated 16 more Lifestyle Coaches with ADA’s Master Trainer support. Classes three and four followed shortly; a fifth session was held in March 2018. To date WyADE has trained more than 85 Lifestyle Coaches.

In March of 2018, the Wyoming Department of Health, Diabetes Control and Prevention Program developed a “Request for Funds Application” to be used by diabetes education centers, public health and primary care clinics as continued support for the implementation of NDPP. Given the potential of additional sites, a sixth training session is currently under development.

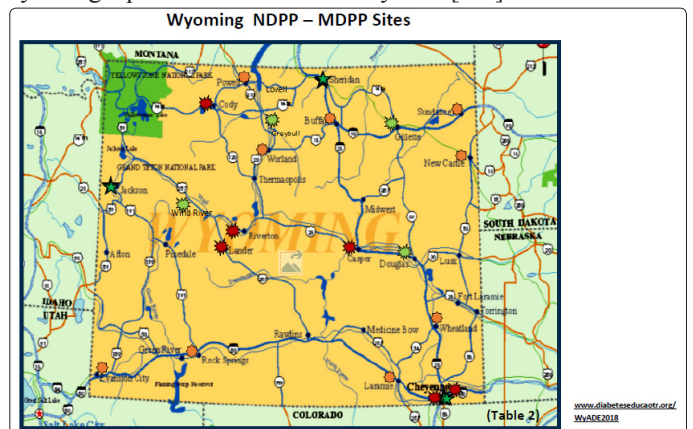
Sustainability

Our next steps include options for annual or semi-annual training sessions to promote and address new educators interested in joining the prevention workforce. Further training opportunities through AADE, Diabetes Training and Technical Assistance Center (DTTAC), or WyADE are all under review. The implementation of virtual training programs is also under consideration. Training expenses remain a major consideration.

Training Conclusions and Limitations

Lifestyle Coach Training participants represent a very diverse community of members of the healthcare team to include: Certified Diabetes Educators, Nurses, Nurse Practitioners, Dietitians, Pharmacists, Pharmacy Technicians, Physical Therapists and Community Health Workers.

At the completion of five training sessions, Wyoming has five new prevention programs (Map 2), all with either pending or full NDPP recognition. With the addition of five recent grantee sites, which will begin offering classes by July 2018, and six potential sites awaiting administrative approval, we are beginning to fill some of the identified geographic hurdles and gaps for our residents by improving access to care and supporting rural strategies for Wyoming’s prevention health care system [1-4].



The ability of WyADE to implement Lifestyle Coach training has fostered the consistency of evidence-based best practice, partnerships, mentoring, continuing education and the recognition and awareness by local, state and federal agencies.

Wyoming’s greatest asset and its sometimes-overwhelming barrier are its frontier nature and the many miles between rural cities and primary health care settings.

WyADE continues to provide the inspiration that moves Wyoming forward.

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