

North Carolina's Guide to Diabetes Prevention and Management

2015-2020



North Carolina Diabetes Advisory Council



Manage weight | Live tobacco free | Participate in lifestyle change programs | Participate in diabetes education | Adhere to treatment plan | Get adequate sleep

Purpose of this Guide

To Provide:

- An overview of North Carolina's Guide to Diabetes Prevention and Management and how it was created.
- Basic information about diabetes and its effects on North Carolina's population.
- Suggestions on how individuals can prevent and manage the diabetes.
- Specific strategies for community groups, employers and health care providers to help gain and maintain control of diabetes, and reduce risks for diabetes-related complications.



How was this Guide developed?

Several statewide meetings informed the Guide's creation.

- A meeting was held in January 2014 with the National Association of Chronic Disease Directors.
- In 2014, the release of a report about diabetes policy in North Carolina from Harvard. It can be accessed at <http://www.chlpi.org/>.
- The NC Diabetes Advisory Council along with many stakeholders formed two workgroups that met periodically for nine months to draft the Guide.



What are the different types of diabetes?



Pre-diabetes



Type 1 Diabetes



Gestational Diabetes

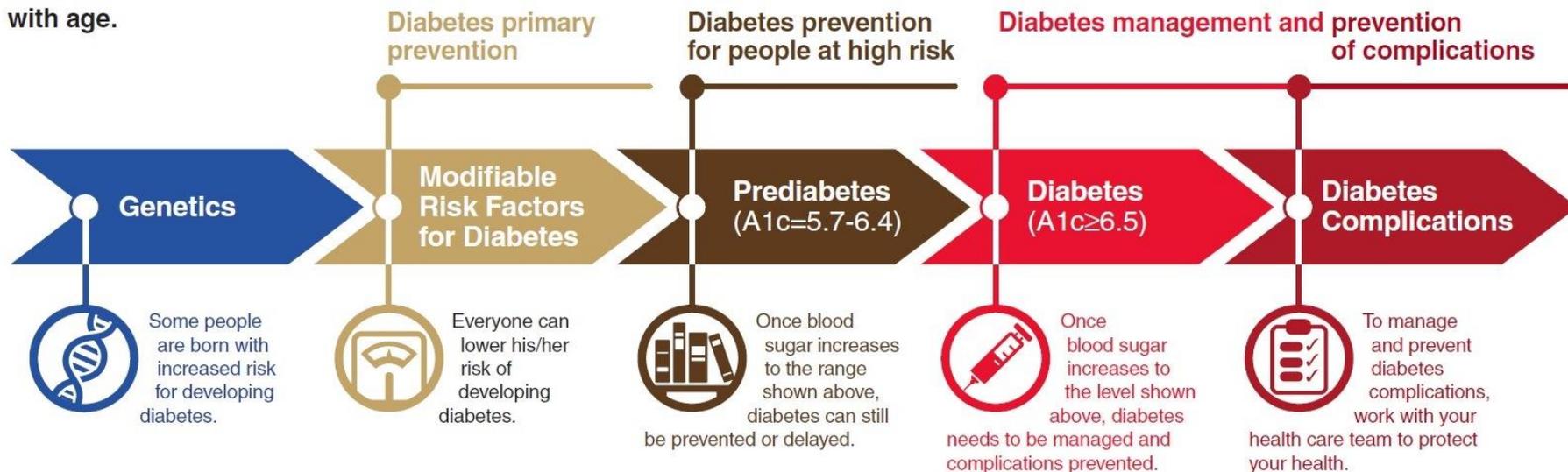


Type 2 Diabetes



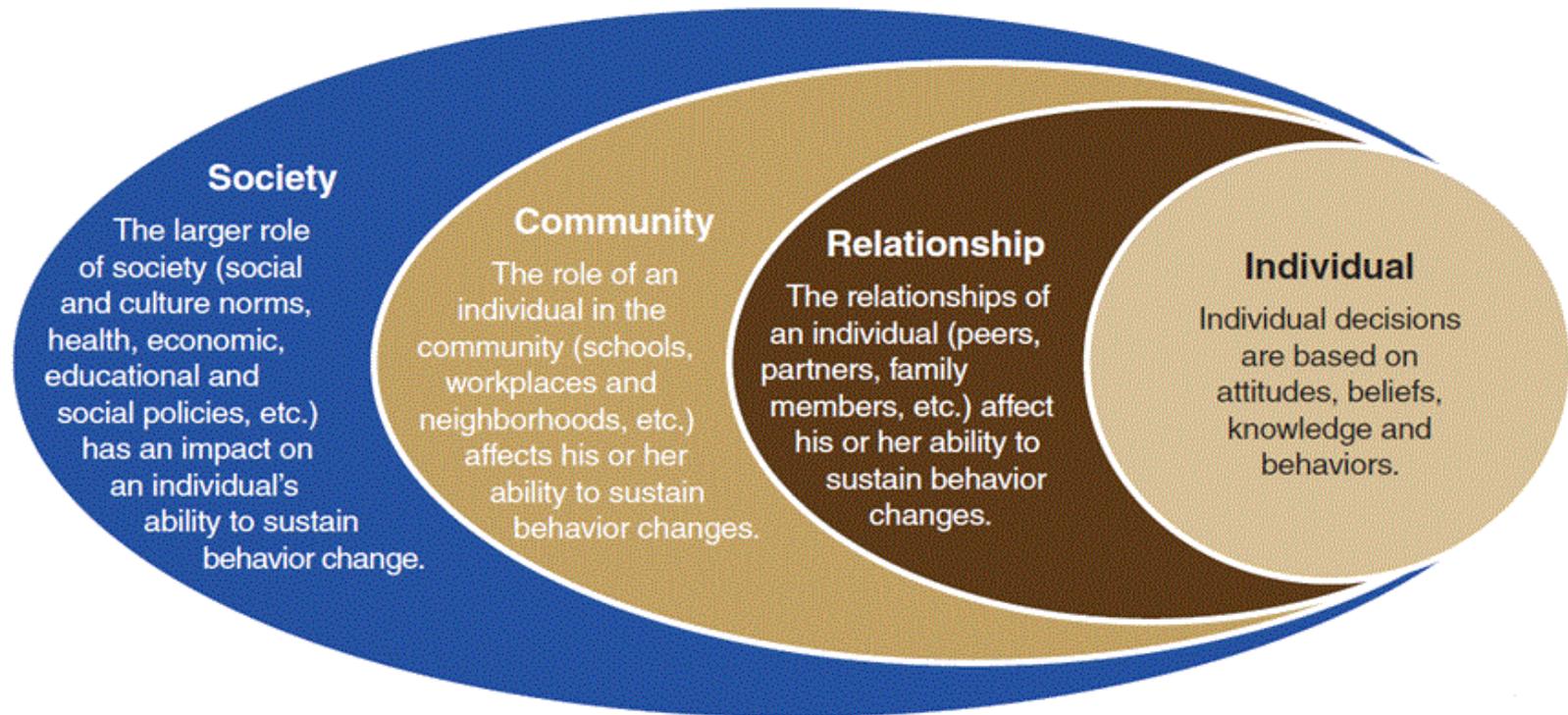
Lifetime Risk Management for Developing and Controlling Type 2 Diabetes

The risk of developing diabetes increases with age.



North Carolina Diabetes Advisory Council

What can your organization do to help prevent and manage diabetes?



How can diabetes be prevented, delayed and managed?

This Guide informs community members, employers and providers on how to:

- Support diabetes prevention and management through strategies that shape the environment so that people are less likely to develop diabetes.
- Provide access to evidence-based education that prevents or delays diabetes for people who are at high risk of developing diabetes.
- Assist people who have already developed diabetes to remain healthy and reduce their risk for developing diabetes complications.



Activities for Community Groups (Faith, Non-Profit, Local Government)

Diabetes Primary Prevention	Diabetes Prevention for People at High Risk	Diabetes Management and Prevention of Complications
<p>To help manage weight and/or follow healthy eating guidelines</p> <ol style="list-style-type: none"> 1. Offer free or low-cost community classes on eating healthy on a budget 2. Ask local employers to work with food vendors who source locally 	<p>To help manage weight and/or participate in regular physical activity</p> <ol style="list-style-type: none"> 1. Establish walking clubs that continue after participating in diabetes prevention programs <p>To help participation in diabetes prevention education programs</p> <ol style="list-style-type: none"> 1. Partner with a sponsoring agency such as a local health department to offer diabetes prevention programs in your congregation or community center 	<p>To help participation in individual and/or group self-management education programs</p> <ol style="list-style-type: none"> 1. Partner with a sponsoring agency to become an expansion site to deliver Diabetes Self-Management Education <p>To help adherence to personalized diabetes treatment plans</p> <ol style="list-style-type: none"> 1. Raise funds for Safety Net Providers to help them offset the cost of medications and supplies for people with diabetes



Activities for Health Care Providers

Diabetes Primary Prevention

To help manage weight and/or participate in regular physical activity

1. Advocate for walkable communities
2. Refer patients who need to lose weight to Eat Smart, Move More, Weigh Less

To help live tobacco free

1. Refer patients to the Quitline

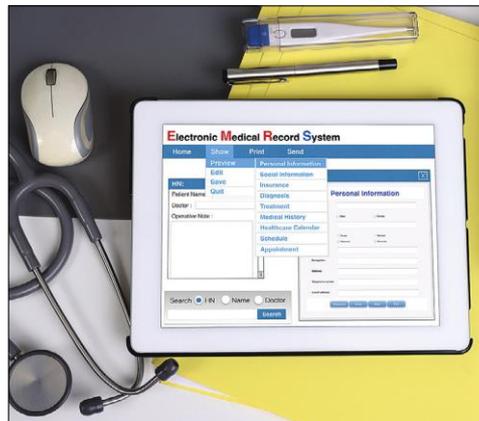
To promote adequate sleep

1. Ask patients about the quantity and quality of their sleep and advise accordingly

Diabetes Prevention for People at High Risk

To help participation in diabetes prevention education programs

1. Refer patients to diabetes prevention programs and build it into the electronic health record



Diabetes Management and Prevention of Complications

To help participation in individual and/or group self-management education programs

1. Establish a professional relationship with hospital transition coordinators to ensure that they know about self-management education and support groups and that they will include this information with discharge paperwork

To help adherence to personalized diabetes treatment plans

1. Develop standing orders for diabetes screening
2. Follow the USPTFS screening recommendations and build it into the practice electronic health record



Activities for Employers

Diabetes Primary Prevention	Diabetes Prevention for People at High Risk	Diabetes Management and Prevention of Complications
<p>To help manage weight and/or follow healthy eating guidelines</p> <ol style="list-style-type: none"> 1. Post nutrition information in cafeterias <p>To help manage weight and/or participate in regular physical activity</p> <ol style="list-style-type: none"> 1. Subsidize gym memberships <p>To help live tobacco free</p> <ol style="list-style-type: none"> 1. Connect with Quitline and smoking cessation opportunities 	<p>To help participation in diabetes prevention education programs/CDC recognized lifestyle change programs</p> <ol style="list-style-type: none"> 1. Offer diabetes prevention programs as a covered benefit 2. Partner with a diabetes prevention program to offer classes at work 	<p>To help participation in individual and/or group self-management education programs</p> <ol style="list-style-type: none"> 1. Partner with local public health to offer recognized Diabetes Self-Management Education at work <p>To help adherence to personalized diabetes treatment plans</p> <ol style="list-style-type: none"> 1. Allow employees time off for diabetes screening



Measuring Progress

North Carolina's Guide to Diabetes Prevention and Management is monitored annually by the North Carolina Diabetes Advisory Council (DAC).



Measuring Progress on Primary Prevention of Diabetes

North Carolina Diabetes Advisory Council (DAC) Progress Indicators

Progress Measure	Data Source	Baseline 2015	2016	2017	2018	2019	Target 2020
Primary Prevention of Diabetes							
Decrease the percentage of adults who are current smokers.	BRFSS ¹	19.0%	17.9%	17.2%			
Decrease the percentage of high school students reporting current use of any tobacco product.	NC YTS ²	27.5%	-	28.8%			
Decrease the percentage of people exposed to secondhand smoke in the workplace in the past seven days.	BRFSS	8.3%	7.7%	9.2%			
Increase the percentage of high school students who are neither overweight nor obese.	YRBS ³	67.7%	-	69.1%			
Increase the percentage of adults getting the recommended amount of physical activity.	BRFSS	48.1%	-	48.3%			
Increase the percentage of adults who consume five or more servings of fruits or vegetables or beans per day.	BRFSS	13.0%	-	17.9%			
Increase the number of legislatives/regulatory policies that support diabetes primary prevention strategies by 2020.	Grant Documents	0	1	1	1		

1. Behavioral Risk Factor Surveillance System (BRFSS)
2. North Carolina Youth Tobacco Survey (NC YTS)
3. Youth Risk Behavior Survey(YRBS)



Measuring Progress on *Primary Prevention for People at High Risk*

North Carolina Diabetes Advisory Council (DAC) Progress Indicators							
Progress Measure	Data Source	Baseline 2015	2016	2017	2018	2019	Target 2020
Diabetes Prevention for Those at High Risk							
Increase the number of people who know that they have prediabetes from 782,000 to 967,000 by 2020.	BRFSS, Pop. estimates NC SCHS ¹	782000	-	996,000			967,000
Increase the number of people in North Carolina who enroll in a diabetes prevention program that is recognized by the CDC from 763 (in October 2015) to 5000 by 2020.	CDC DPRP State level report	763	2,246	5,109	5,689	8,560	5,000
Increase the number of North Carolina counties where people at high risk of developing diabetes can access at least one diabetes prevention program that is recognized by the CDC from 23 to 100 by 2020.	CDC DPRP Report	23	29	47	48		100
Increase the number of public employees and retirees who have diabetes prevention program recognized by the CDC as a covered benefit from zero to 680,000 by 2020.	NC State Health Plan benefits	0	575,002	0	0		680,000
Increase the number of legislatives/regulatory policies that support diabetes prevention strategies from zero to two by 2020.	Grant Documents	0	2	1	2		2

1. North Carolina State Center for Health Statistics (NC SCHS)

Measuring Progress on Diabetes Management and Prevention of Complications

North Carolina Diabetes Advisory Council (DAC) Progress Indicators

Progress Measure	Data Source	Baseline 2015	2016	2017	2018	2019	Target 2020
Diabetes Management and Prevention of Complications							
Increase the number of people in North Carolina with type 2 diabetes who have taken a diabetes class from 460,000 to 533,000.	BRFSS, Pop estimates NC SCHS	460,000	-	469,000			533,000
Increase the number of people in North Carolina with type 2 diabetes who enroll in a recognized Diabetes Self Management Program from 27,500 to 50,000 by 2020.	CDC report	27,500	43,813	43,553			50,000
Decrease the number of diabetes related emergency room visits where diabetes as any listed cause of visit by 10 percent, from 356,000 ER visit to 320,000 ER visits by 2020*.	NC Detect ¹	356,515	383,309	445,500	467,995		320,000
Increase the number of legislatives/regulatory policies that support diabetes management strategies.	Grant Documents	1	1	1	1		

*In October 2015, the ICD-9 codes² were replaced by ICD-10 codes. This transition may have potential effects on the 2015 and 2016 emergency room visit counts.

1. North Carolina Disease Event Tracking and Epidemiologic Collection Tool (NC DETECT)
2. International Classification of Diseases (ICD)



North Carolina Diabetes Advisory Council

Diabetes North Carolina



[Diabetes Prevention](#) ▾

[Diabetes Management](#) ▾

[Diabetes Advisory Council](#)



[Find a Diabetes **Prevention** Program](#) | [Find a Diabetes **Management** Program](#)

This site provides resources and information for the community, employers and health care providers to reduce the impact of diabetes in North Carolina. Learn to manage diabetes or target risk factors that lead to diabetes.



North Carolina Diabetes Advisory Council

Ronny Bell, PhD, MS, Chair

Jan Nicollerat, RN, CDE, MSN, Vice Chair

www.diabetesnc.com



North Carolina Diabetes Advisory Council