

3/28/2023

Meeting Subject: Diabetes Strategy Team Meeting - 3/28/2023

Meeting Date: 3/28/2023 11:00 AM

## Agenda

Goal: Reduce the Prevalence of Diabetes in Baltimore City

Related Activities	Today's Discussion	Next Steps
<ul style="list-style-type: none"><li>• Increase the number of partnerships btw. Community and DPP/ DSM</li><li>• Increase the number of referrals to these programs</li></ul>	<p>1. INTRODUCTIONS: from any new attendees. Please share: Name, Organization, What you would like to get out of your participation, any shared goals, and what you would like to contribute.</p> <p>Christine Crabbs: Sr Director for Community Health at UMMC. Andela Ginn-Meadow has resigned and Christine is transitioning into her role.</p>	
<ul style="list-style-type: none"><li>• Increase the number of partnerships btw. Community and DPP/ DSM</li><li>• Increase the number of referrals to these programs</li></ul>	<p>1. FOLLOW-UP: The AHA- DPP/ DMST partnerships. <del>Angela Ginn-Meadow</del> Kim Mays and Rhonda Chatmon will provide an update about Virtual Chef-led cooking instructions and potential collaboration with the DPPs/ DMSTs.</p> <p>AHA has funding to create a video series mimicking work with Broncati around integrating cooking classes with DPP curriculum.</p> <p>How do we create a tool or resource that any DSMT or DPP facilitator can utilize?</p> <ul style="list-style-type: none"><li>• Video series - six sessions housed on YouTube</li><li>• Facilitators within videos to cook with the chef or chef to camera</li><li>• Filming - June 2023</li><li>• Videographer is ready</li></ul>	<ul style="list-style-type: none"><li><input type="checkbox"/> Let Rhonda and Kim know (1) if this is a valuable resource, (2) short or long format, (3) is this a resource you can see yourself using? rhonda.chatmon@heart.org Kimberly.Mays@heart.org</li><li><input type="checkbox"/> Determine how your organization can best market these video resources.</li></ul>

- Ensure we are meeting the needs of facilitators

What needs to be included with the videos?  
Is this a resource that you could use?  
Short- or long-form? Currently DPP courses are 1 hour long. Do we want this, or a shorter vignette?  
What would it need to look like for everyone to want/be able to use it?

Alice Siawlin Chan

Short form is more appealing.

Patient Family Advisory Council meeting is tomorrow.

Alice will ask PFAC for their thoughts tomorrow.

[www.Healthier2gether.org](http://www.Healthier2gether.org)

- Think through how to embed video resources.

Rachel Galkin

Want to leverage the resource for participants.

Need to speak with St. Agnes re: marketing.

Short form is preferred.

Christine Crabbs

Shorter videos lend themselves for people to pay attention.

Patients don't know how to cook, so focusing on simple things like hard boiled eggs, knife skills, etc. are needed.

Briana Wagner

Short videos.

Marketing: recipe cards

Kimberly Mays

Longer form to allow people to cook along/watch

Shorter form - basic skill building, don't lend themselves to real-time practice

	<p>Rhonda Ford Chatmon Referral opportunity</p> <p>Keyonna Mayo Will pass on information/feedback from the patient side.</p>	
<ul style="list-style-type: none"> <li>• Increase the number of partnerships btw. Community and DPP/ DSM</li> <li>• Increase the number of referrals to these programs</li> </ul>	<ol style="list-style-type: none"> <li>1. DISCUSSION: Engaging Community Members. We have funds to provide stipends to up to 4 community members to participate in this workgroup. How can we most effectively engage with these participants? What insights or input would be useful?</li> </ol> <p>Suggestions: training for current workgroup to effectively engage with community, learning from successful community engagement</p> <p>Suggestions: feedback on DPP/ DMST from community members, input on retention, SDoH barriers for diabetes treatment, desired interventions or supports</p> <p>Kate Jennings All ideas discussed here will be helpful. Community garden is opening 4/1. Interest in cooking and connection to food.</p> <p>Keyonna Mayo VALUES program - did a lot of training and community engagement that could translate into this. Tap into the CHWs that worked on this project.</p>	
<p>Utilize data to understand the problem and improve our response</p>	<ol style="list-style-type: none"> <li>1. DISCUSSION: Shared Measures of Success. What are 1-2 Outcome Measures that we want to share ACROSS all of the diabetes work to</li> </ol>	

	<p>share with the larger LHIC? This should be data that 1. reflects the outcomes of both regional partnerships AND other diabetes stakeholders, 2. can be/ already is being collected and tracked, 3. Can be shared with the LHIC on a regular basis (monthly/ quarterly).</p> <p>Ex: Total reduction in A1c, Total reduction in BMI, Total # of people enrolled in diabetes education (all types), # of people referred to food programs.</p> <p>Alice Siawlin Chan Above are appropriate items to track. It isn't easy to track a cohort of A1c reduction. We can share the volume referred. How can groups raise awareness from BCHD and team and integrate into our reporting and partner programs?</p> <p>Rhonda Ford Chatmon Suite of outpatient tools, target type 2 diabetes. Could be of interest, or an opportunity for partner participation and data collection.</p> <p>Keyonna Mayo Track the health outcomes of people.</p>	
<ul style="list-style-type: none"> <li>Utilize data to understand the problem and improve our response</li> </ul>	<ol style="list-style-type: none"> <li>REVIEW: ARC GIS map for feedback and input. Bri the BCHD Epi will provide an update on the ARC GIS map, including a quick demo of the new features.</li> </ol> <p>Not available to be shared yet. A layer for healthy food priority areas, parks, prevalence of annual checkups has been added.</p>	<ol style="list-style-type: none"> <li>**To complete the Diabetes Map, we will need a list of stakeholders. Please send Stephane a list of your stakeholders with their roles, so they can be mapped and shared with the workgroup.</li> </ol>