KNOW DIABETES BY HEART

CHWs Providing Diabetes Support in Health Disparate Communities

March 28, 2022

Know Diabetes by Heart™ Awards $900,000 for Community Education

Ten grants from the American Diabetes Association and the American Heart Association's joint initiative aim to decrease heart disease and stroke among people with type 2 diabetes

Know Diabetes by Heart™

Know Diabetes by Heart™

COMMUNITY GRANTEES

American Heart Association.

American Diabetes Association.

Scripps

NACHW
NATIONAL ASSOCIATION OF COMMUNITY HEALTH WORKERS

Jefferson Health
HOME OF SIDNEY KIMMEL MEDICAL COLLEGE

TEXAS A&M HEALTH
Center for Population Health and Aging

COOPERATIVE EXTENSION
College of Agriculture, Forestry and Life Sciences

JOHNS HOPKINS UNIVERSITY

Esperanza
Strengthening Our Hispanic Community

inquisithealth

Feinstein Institutes for Medical Research
Northwell Health

GATEWAY COMMUNITY
Health Center, Inc.

NM STATE
BE BOLD. Shape the Future.
College of Agricultural, Consumer and Environmental Sciences
Cooperative Extension Service
Extension Family and Consumer Sciences

Chicago Hispanic Health Coalition

Know Diabetes by Heart™

OVERVIEW

- The KDBH community grantees integrated KDBH health lesson and patient education resources into the ADA approved diabetes support program activities

OBJECTIVES:

Among KDBH Community Grantee participants with type 2 diabetes, assess for change in:

- Proportion of participants who are aware that people with type 2 diabetes are at an increased risk for heart attack and stroke
- Proportion of participants who are aware that cardiovascular disease is the leading cause of death for people with type 2 diabetes
- Proportion of participants who have discussed their risk for heart disease with their healthcare provider
- Proportion of participants who have engaged in at least one health action or behavior to better manage their condition and risk for cardiovascular disease

METHODOLOGY

DIABETES SUPPORT PROGRAM INTEGRATION OF KDBH HEALTH LESSON INTO THE PROGRAM SERIES

- Pre/post data collection: data was collected at baseline prior to the beginning and/or on the first day of the support program and at follow-up, immediately post-program

KDBH HEALTH LESSON HELD AS A SINGLE SESSION

- Post data collection: follow-up only survey was disseminated via a survey link to all participants who attended the single session

KDBH HEALTH LESSON

American Heart Association.

American Diabetes Association.

American Heart Association.

American Diabetes Association.
Connected for Life

WHAT IS KNOW DIABETES BY HEART?

The American Heart Association and the American Diabetes Association's initiative, **Know Diabetes by Heart™**, aims to empower people living with type 2 diabetes to lower their risk for cardiovascular disease.

Visit KnowDiabetesbyHeart.org to learn more.

Know Diabetes by Heart™

RESOURCES

American Heart Association.

American Diabetes Association. Connected for Life

Know Diabetes by Heart™

4 Questions to Ask Your Health Care Provider About Diabetes and Your Heart

1. What can I do to lower my risk for heart disease and stroke?
2. Do any of my medications help me manage my risks for heart disease or other complications?
3. Are there programs that can help me manage my condition? Can you give me a referral?
4. How can I meet others going through my same experience?

Adults with diabetes are **2X** MORE LIKELY TO HAVE A HEART ATTACK OR STROKE THAN PEOPLE WITHOUT DIABETES.

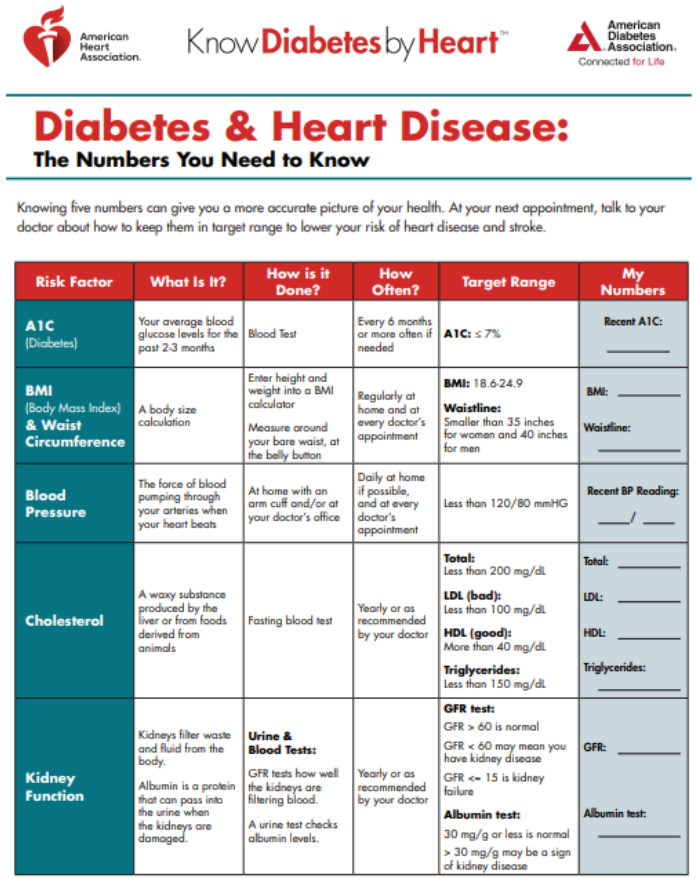
If you have type 2 diabetes, **learning about your higher risk** for heart disease and stroke is one of the best ways you can take care of yourself.

Take the first step: Make an appointment to talk with your health care provider. You can lower your risks.

We're here to support you. Find answers to your questions and join the initiative at: **https://KnowDiabetesbyHeart.org/join**

FOUNDING SPONSORS

NATIONAL SPONSORS



American Heart Association. Know Diabetes by Heart™ American Diabetes Association. Connected for Life

Diabetes & Heart Disease: The Numbers You Need to Know

Knowing five numbers can give you a more accurate picture of your health. At your next appointment, talk to your doctor about how to keep them in target range to lower your risk of heart disease and stroke.

Risk Factor	What Is It?	How is it Done?	How Often?	Target Range	My Numbers
A1C (Diabetes)	Your average blood glucose levels for the past 2-3 months	Blood Test	Every 6 months or more often if needed	**A1C:** ≤ 7%	**Recent A1C:** _____
BMI (Body Mass Index) **& Waist Circumference**	A body size calculation	Enter height and weight into a BMI calculator Measure around your bare waist, at the belly button	Regularly at home and at every doctor's appointment	**BMI:** 18.6-24.9 **Waistline:** Smaller than 35 inches for women and 40 inches for men	**BMI:** _____ **Waistline:** _____
Blood Pressure	The force of blood pumping through your arteries when your heart beats	At home with an arm cuff and/or at your doctor's office	Daily at home if possible, and at every doctor's appointment	Less than 120/80 mmHG	**Recent BP Reading:** ____/____
Cholesterol	A waxy substance produced by the liver or from foods derived from animals	Fasting blood test	Yearly or as recommended by your doctor	**Total:** Less than 200 mg/dL **LDL (bad):** Less than 100 mg/dL **HDL (good):** More than 40 mg/dL **Triglycerides:** Less than 150 mg/dL	**Total:** _____ **LDL:** _____ **HDL:** _____ **Triglycerides:** _____
Kidney Function	Kidneys filter waste and fluid from the body. Albumin is a protein that can pass into the urine when the kidneys are damaged.	**Urine & Blood Tests:** GFR tests how well the kidneys are filtering blood. A urine test checks albumin levels.	Yearly or as recommended by your doctor	**GFR test:** GFR > 60 is normal GFR < 60 may mean you have kidney disease GFR <= 15 is kidney failure **Albumin test:** 30 mg/g or less is normal > 30 mg/g may be a sign of kidney disease	**GFR:** _____ **Albumin test:** _____

American Heart Association.

American Diabetes Association. Connected for Life

Know Diabetes by Heart™

7 consejos para cuidar el corazón cuando tienes diabetes tipo 2

Cuando tienes diabetes tipo 2, tomas muchas decisiones durante todo el día, lo cual puede ser abrumador. Pero estás haciéndolo y lográndolo cada día.

La Asociación Americana del Corazón y la Asociación Americana de la Diabetes crearon la iniciativa Know Diabetes by Heart para ayudarte en tu recorrido. ¡Esperamos que te sientas orgulloso de ti mismo por todo tu arduo trabajo!

Añade estos siete consejos a tu lista de cuidados propios para el corazón y el cuerpo con el fin de que todos tus esfuerzos tengan un mayor impacto.

Tu doctor puede ayudarte a hacer un plan para:

1. Visita a tu doctor con regularidad. Pregunta sobre tu salud cardíaca.
2. Continúa los hábitos de comer saludablemente. Para empezar, añade frutas y verduras. Comer mejor te ayudará a sentirte mejor.
3. Mantente activo. Sólo o con un amigo.
4. El cuidarte a ti mismo puede ayudarte a cuidar tu corazón. Reducir el estrés es bueno para la mente y el cuerpo.
5. Deja de fumar.
6. Monitorea la glucemia, presión sanguínea, colesterol y peso.
7. Toma medicamento(s) siguiendo las indicaciones.

La gente con diabetes PUEDE vivir vidas más saludables.

No estás solo en esta situación. Encuentra respuestas a tus preguntas y únete a la iniciativa en: **https://knowdiabetesbyheart.org/join**

PATROCINADORES FUNDADORES

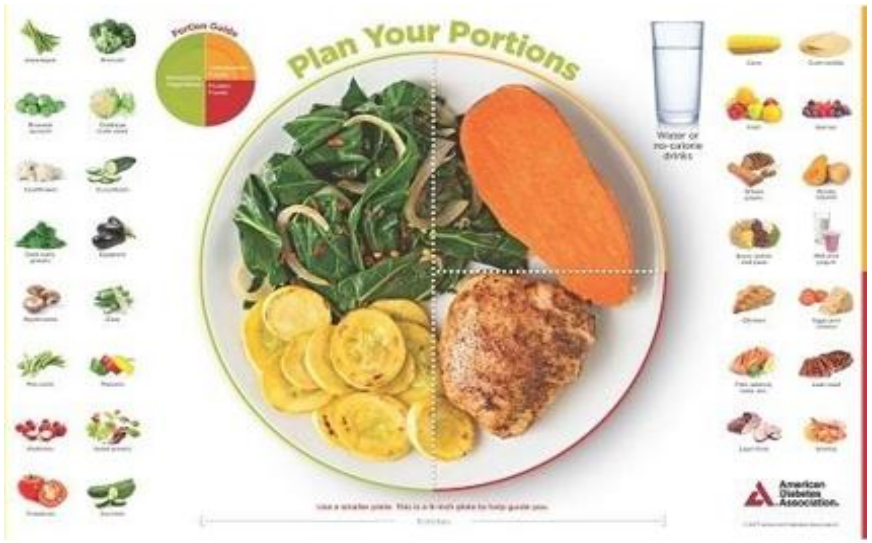
PATROCINADORES NACIONALES

Know Diabetes by Heart™

American Heart Association.

RESOURCES

American Diabetes Association.



American Diabetes Association.
Connected for Life

Ask the Experts

Know Diabetes by Heart™

American Heart Association.

American Diabetes Association.

Know Diabetes by Heart™

PROGRAM DELIVERY

12 community partners in 21 states across the country

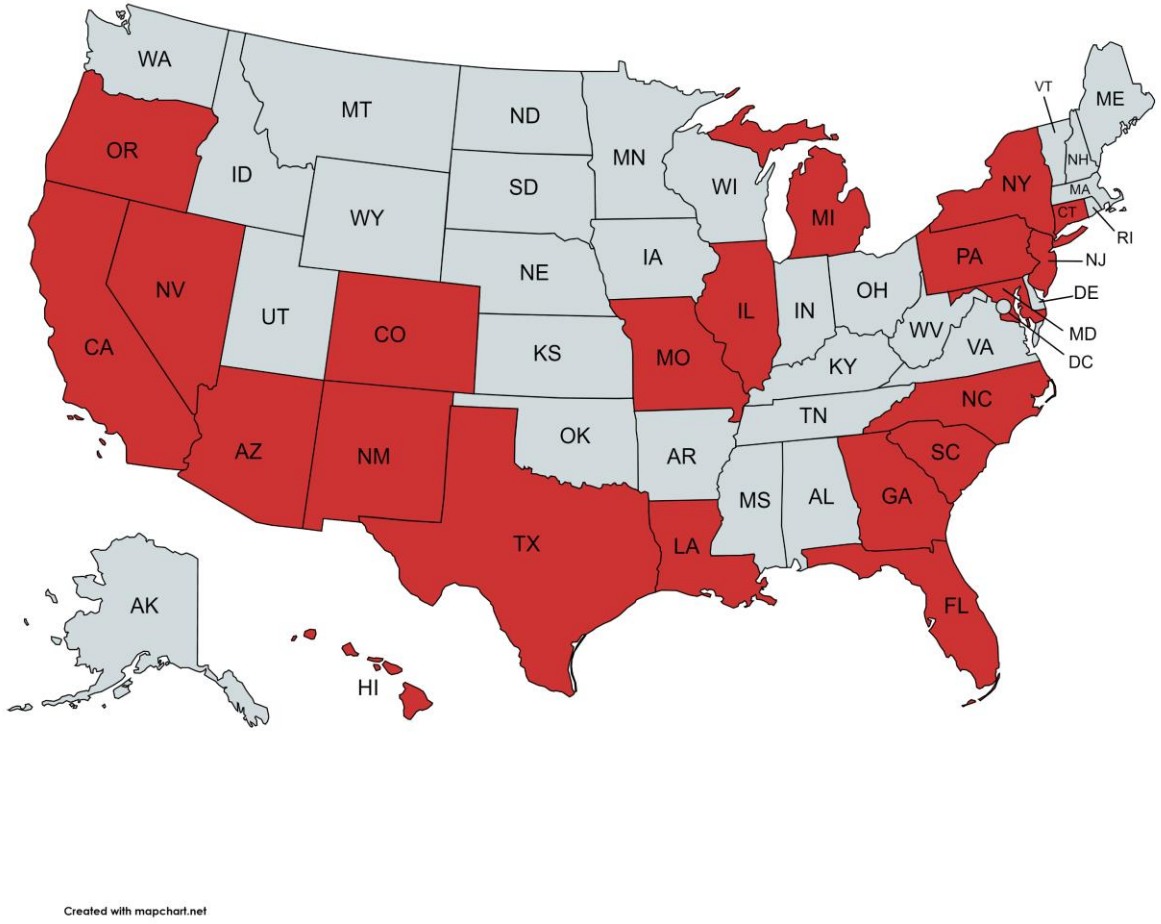
DIABETES SUPPORT PROGRAM INTEGRATION

- **6,087** enrolled

KDBH HEALTH LESSON SINGLE SESSION

- **8,943** participants

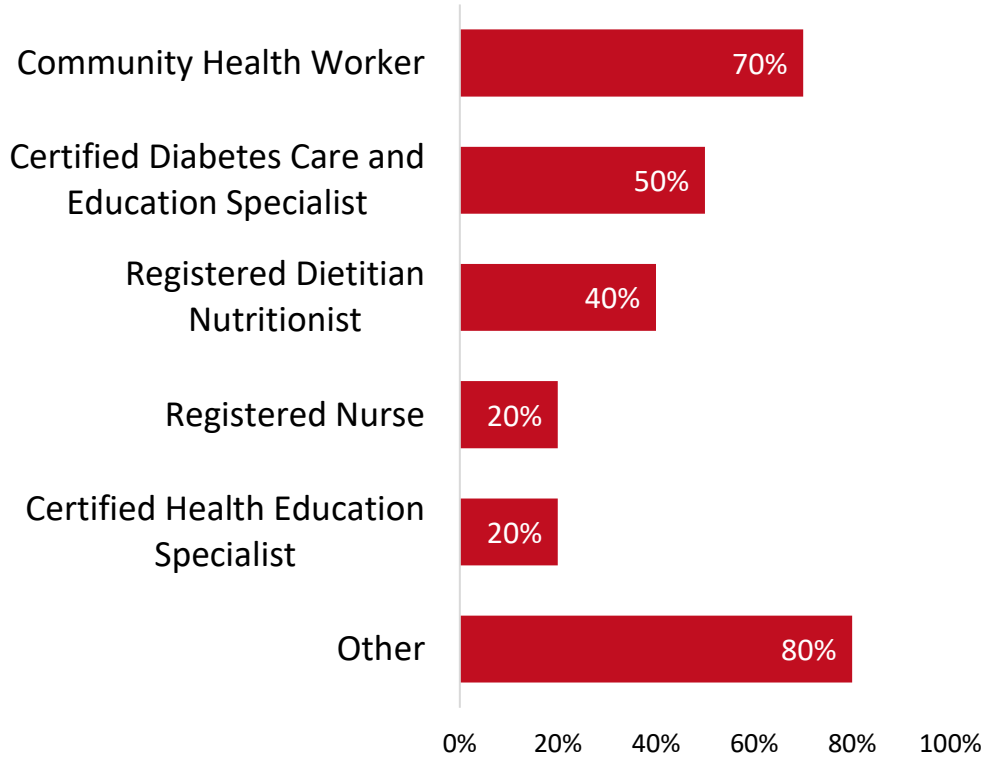
- **TOTAL: 15,030** participants



Know Diabetes by Heart™

Grantee	Number of States Served	List of States Served
Clemson University	**13**	**AZ**, **CA**, CO, **FL**, **GA**, **MD**, MI, MO, NJ, **NY**, NC, SC, **TX**
National Association of Community Health Workers	**8**	**CA**, CT, **FL**, **GA**, HI, LA, OR, **TX**
Texas A&M Health Science Center	**3**	**AZ**, **GA**, **TX**
InquisitHealth	**2**	NV, **NY**
New Mexico State University	**1**	NM
Scripps Whittier Diabetes Institute	**1**	**CA**
Gateway Community Health Center	**1**	**TX**
Esperanza	**1**	**PA**
Johns Hopkins University / Feinstein Institutes for Medical Research	**1**	**MD**
Chicago Hispanic Health Coalition - UIC	**1**	IL
Thomas Jefferson University	**1**	**PA**

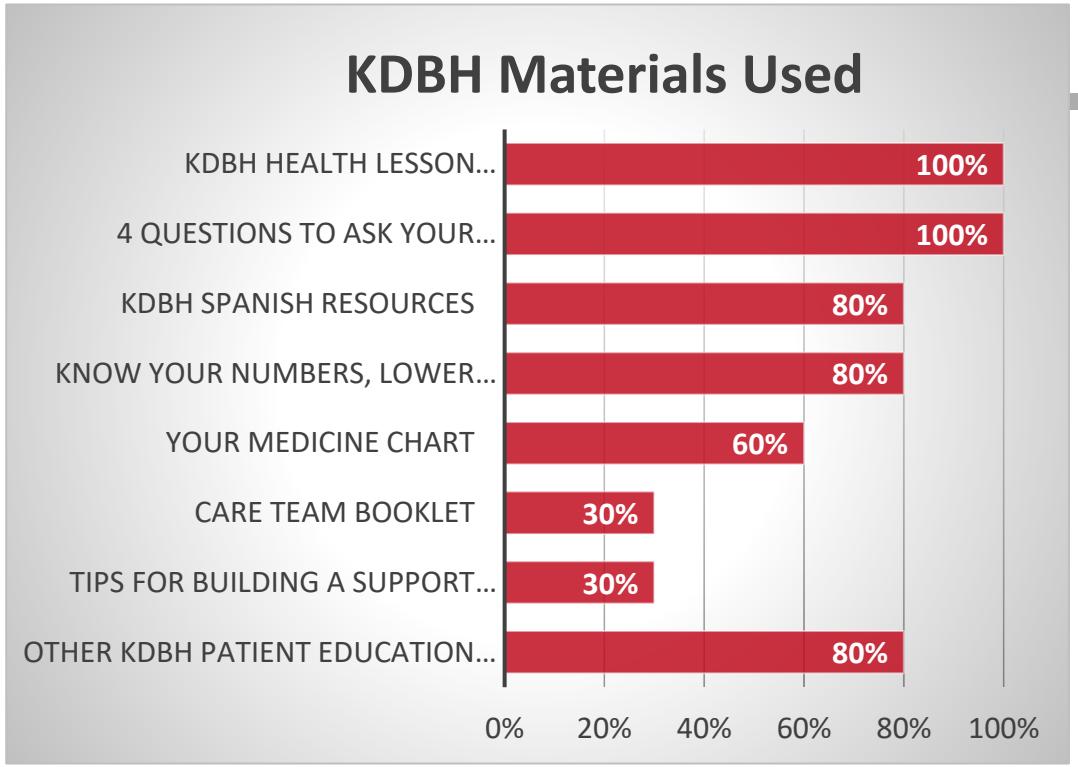
WHO DELIVERED THE PROGRAM

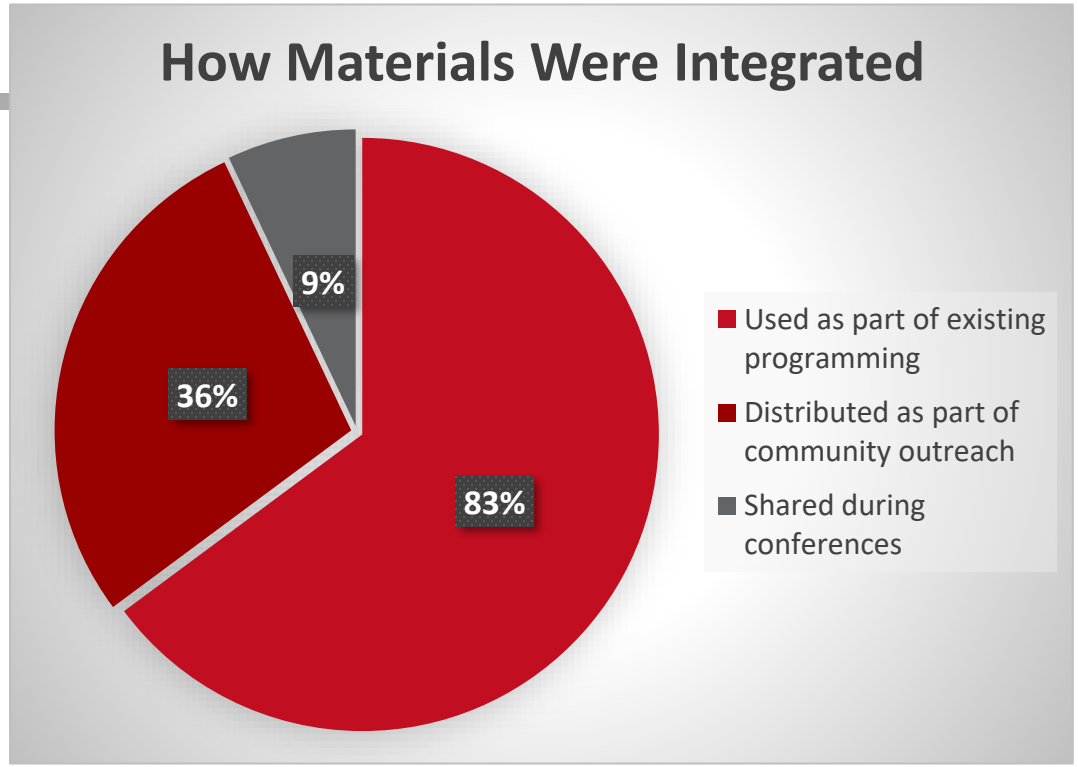


OTHER INCLUDED:

- Non-certified educator
- Champions from local community churches
- Extension Agents
- College professor
- Internal Medicine doctor
- Exercise Physiologists and LPN
- Pharmacist

RESOURCE UTILIZATION





26,950 people received KDBH information through community outreach, e-newsletters, radio, etc.

Know Diabetes by Heart™

DEMOGRAPHICS

AGE*

33% ≤ 45 years old

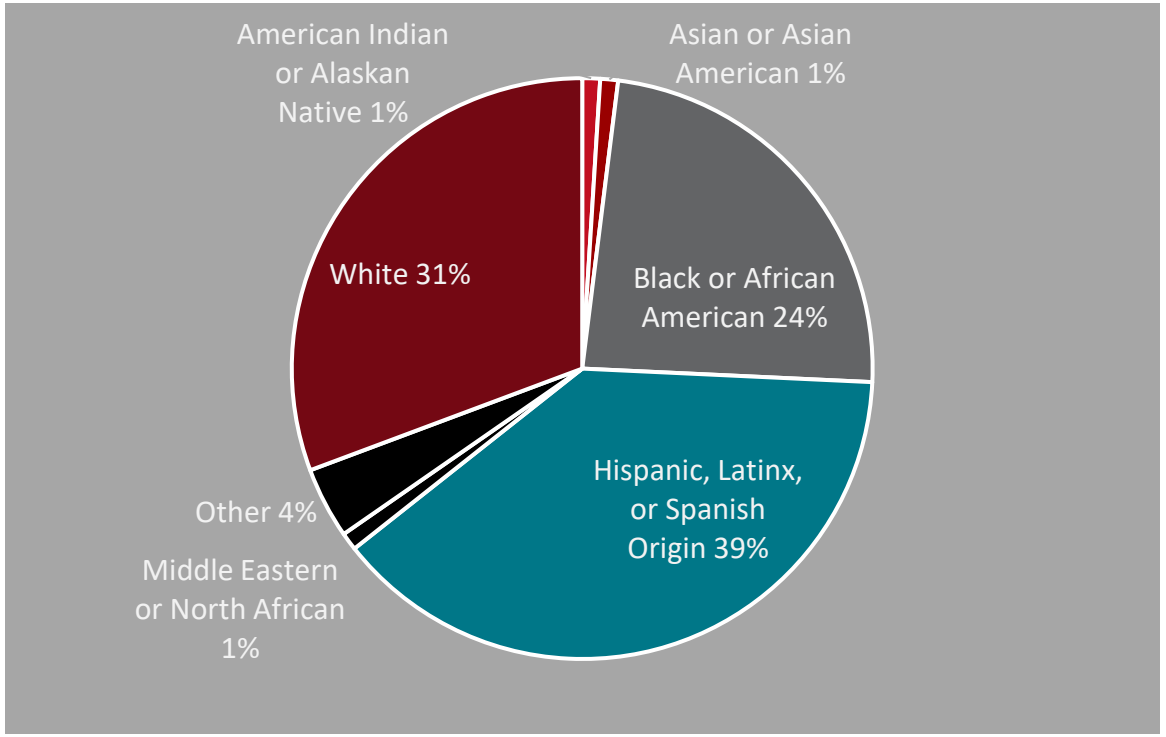
51% 46-65 years old

17% ≥ 66 years old

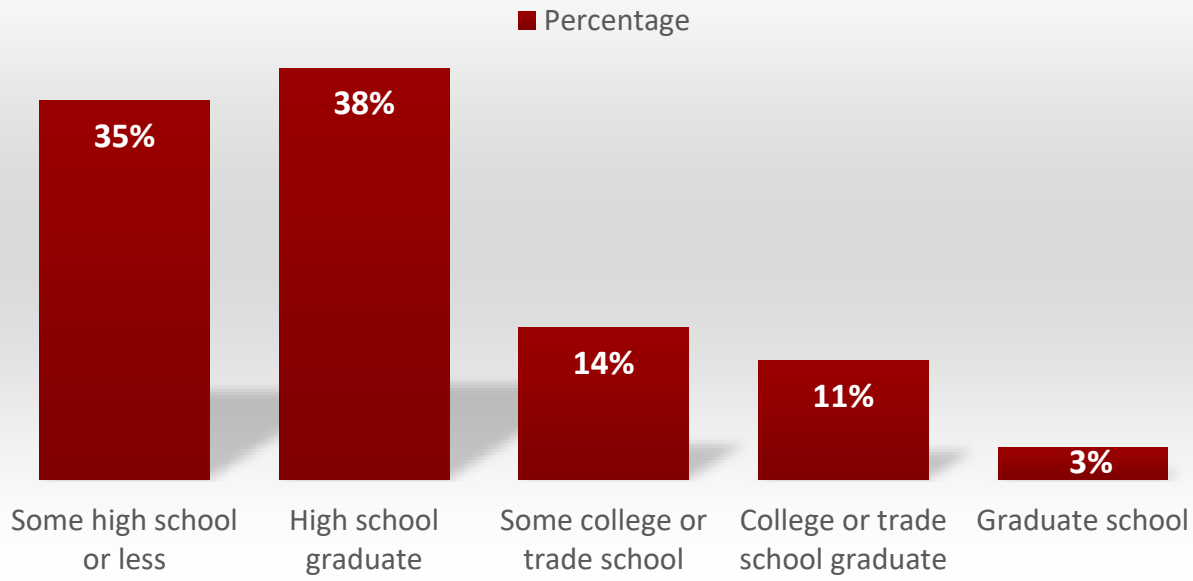
GENDER

69% Female | **31%** Male

ETHNICITY



Education*



*Data from the post program survey only

PROGRESS TOWARD GOALS AND OBJECTIVES

PROGRESS MADE

- Increased program enrollment and participation
- Building new or maintaining existing partnerships
- Positive participant outcomes

ACTIVITIES UTILIZED

- Consistently promoting program to recruit new participants
- Building and maintaining partnerships
- Utilizing partners to expand the program to new sites
- Offering virtual sessions
- Training new presenters/lifestyle coaches

OUTCOMES

AFTER RECEIVING THE KDBH HEALTH LESSON:

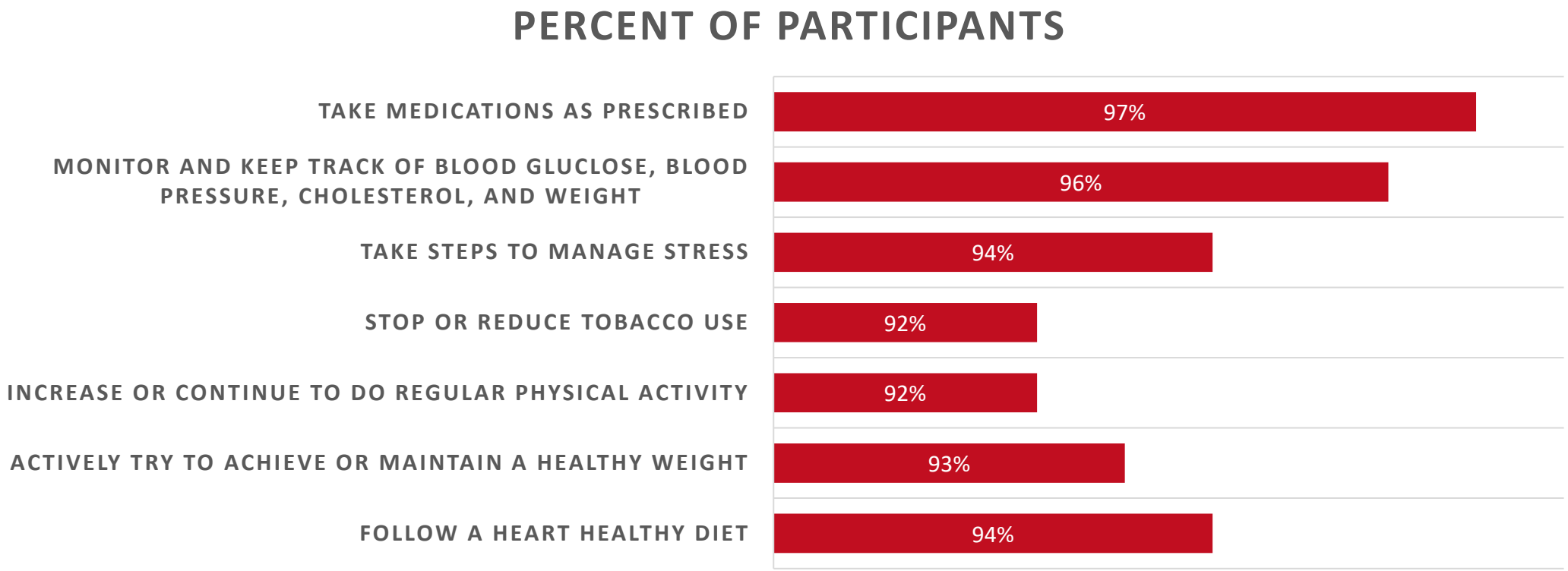
90%
were aware that cardiovascular disease is the **leading cause of death** for people with type 2 diabetes

91%
correctly identified that having type 2 diabetes **increases risk** for high blood pressure, unhealthy cholesterol levels, heart attack, and stroke

94%
report that they intend to **have a conversation with their health care provider** about their risk for CVD as a result of the presentation

Know Diabetes by Heart™

AFTER RECEIVING THE KDBH HEALTH LESSON PARTICIPANTS WERE LIKELY OR VERY LIKELY TO…



American Heart Association.

American Diabetes Association.

SUCCESSES

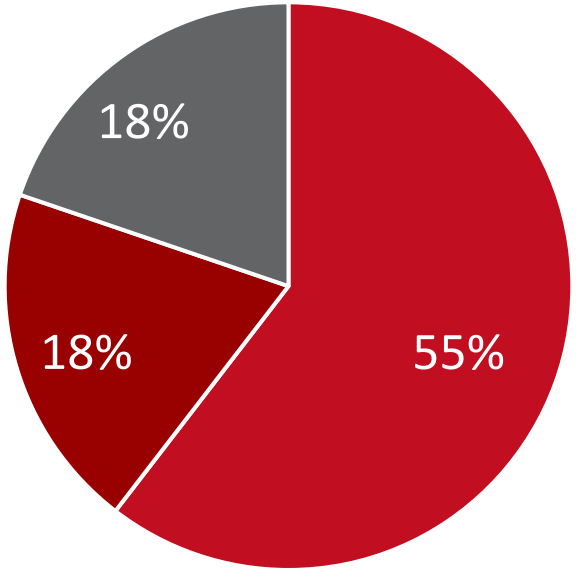
- HOSTING ADDITIONAL WEBINARS & ZOOM CLASSES
- IN-PERSON COOKING CLASSES
- COMMUNITY SCREENINGS
- TRAINING HEALTH EXTENSION AGENTS
- SPANISH NEWSLETTER PROMOTIONS
- PARTNER COLLABORATIONS WITH CHURCHES, AREA AGENCY ON AGING, RADIO, COMMUNITY CENTERS, HEALTH SYSTEMS, NEIGHBORHOOD CENTERS

CHALLENGES

- RESTRICTIONS OF IN-PERSON GATHERINGS DUE TO COVID-19
- COLLECTING CLINICAL METRICS DUE TO COVID-19 RESTRICTIONS
- PROMOTIONS OF PROGRAM DURING PANDEMIC
- ZOOM FATIGUE
- LACK/LIMITED ACCESS TO INTERNET

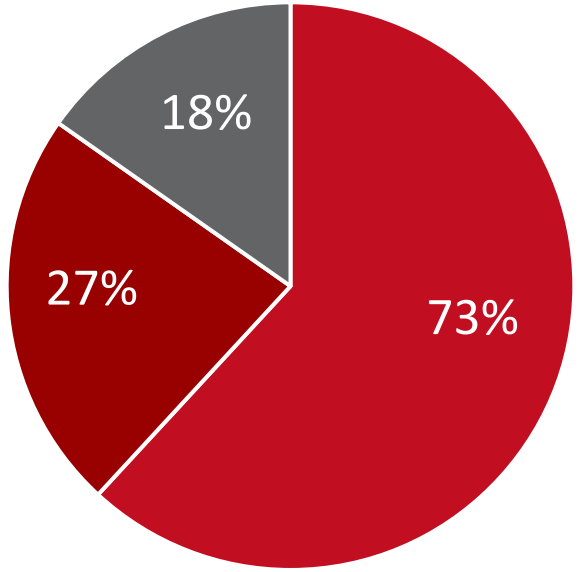
Know Diabetes by Heart™

SUCCESSES



- Learning and/or implementing new communication strategies
- Strong network and/or support system
- Expansion of programs

CHALLENGES



- Adapting and/or delaying implementation during COVID-19
- Low participation in evaluation
- Maintaining participant engagement

Know Diabetes by Heart™

PROGRAM SUSTAINABILITY

Grantee	Plan for sustaining project or program
National Association of Community Health Workers	Integrate KDBH into diabetes outreach and use program resources for community education.
Thomas Jefferson University	Continue to educate new patients in cardiac rehab with KDBH and upload educational presentation to cardiac rehab website.
Texas A&M University	Work with partners and continue to market KDBH to grow enrollment.
Chicago Hispanic Health Coalition - UIC	Continue to provide education and create community awareness of KDBH information.
Feinstein Institutes for Medical Research	Further develop infrastructure to support broad dissemination and evaluation of programming.
Esperanza	Will use KDBH materials in appropriate education settings.
Gateway Community Health	Continue KDBH on a small scale and use materials to educate patients about disease prevention and management.
Scripps Whittier Diabetes Institute	Work to share the program with like-minded partners to sustain KDBH in the long-term. Abstract submitted for the ADA's 82nd Scientific Sessions.
InquisitHealth, Inc.	Integrate KDBH materials into existing content/programming for all diabetic clients.
New Mexico State University	Distribute KDBH information as part of existing and ongoing educational efforts.
Clemson University	Translate promotional materials to Spanish and offer KDBH as part of existing programs.

APHA 2021
ANNUAL MEETING & EXPO
DENVER AND ONLINE | OCT. 24 — 27
CREATING THE HEALTHIEST NATION:
STRENGTHENING SOCIAL CONNECTEDNESS

NCFH
MIGRANT HEALTH
National Center for Farmworker Health, Inc.

HIGHLIGHTS

"While working on this project, we learned that while we did touch lightly on diabetes and heart disease, this was a significant knowledge gap for our participants. Interestingly, this was a knowledge gap that participants often times didn't know that they had. This re-affirmed the necessity to integrate the Know Diabetes by Heart materials into the essential framework for every program participant who completes the Diabetes Self-Management Support program."

PARTICIPANT TESTIMONIALS:

“The video clip during the presentation yesterday opened my eyes! I have been having the wrong perspective! Instead of looking at this as a punishment, this is a chance for a whole new life for me!”

“I am a living proof that it doesn’t matter where you come from or your eating habits, you can change. I am greatly appreciated with everyone who has helped me throughout my process. I refuse to be another statistic and will continue to strive to be the best that I can be. I hope that people can see my story and will want to change because your life matters.”

SUCCESS STORY – MIRIAM FROM TX

When I came seeking services, I was not aware I had diabetes. I was seen by a healthcare provider and was referred to get lab work done. In my follow up appointment, they informed me I had diabetes and had an A1C of 12.9%. I was shocked and decided I wanted to make a change and take charge of my health. I was referred to diabetes classes and I was eager to learn about diabetes and ways that I could manage it. I gained a lot of useful information. I learned the importance of healthy meal planning, how your medication helps specifically targeting your diabetes, and complications that could arise from uncontrolled diabetes. I enjoyed the discussions and the peer support and the positive and motivating comments. I was so excited and proud of myself that with all of my hard work and putting into practice everything I learned, I was able to lower my A1C to 6.3%. I will continue to practice the healthy lifestyle I have to manage my diabetes.

I am very grateful for participating in the diabetes course. I would refer this course to anyone that has diabetes. I hope other people feel motivated and see that just like me they can be able to lower their A1C and manage their diabetes.

TESTIMONIALS

- "Recently had an A1c result as I did not have it for a long time. I feel better and this makes me feel that I can control my diabetes. This program has made me aware, it motivates me a lot, it is like a good friend who is constantly reminding you to take care of yourself, to eat healthy, to take your medications. It is a constant reminder that comes to you in a simple way. I hope that this program reaches many people and that it helps them as it has helped me take care of my diabetes and my heart."

- "I now understand how to manage my diabetes and am confident that I can lead a healthy life!"

- "The program motivates me to take care of myself because it makes me more aware of my health care. I am very happy because I am achieving it now. My fasting sugar level is between 120 to 150, before it was 250 and up."

- "The program is really helpful in helping me eat heart healthy and reminding me to monitor my blood sugar."

KNOW DIABETES BY HEART

KnowDiabetesbyHeart.org

Know Diabetes by Heart: CHWs Providing Diabetes Support in Health Disparate Communities

GATEWAY COMMUNITY Health Center, Inc.

- Gateway Community Health Center, Inc. is a federally qualified health center
- Gateway CHC receives special funding from the U.S. Government to take care of patients most in need
- We take care of patients on an outpatient basis without regard of the ability to pay

- Gateway CHC is part of the largest healthcare network in the country
- There are 1,451 FQHCs with 12,743 locations across the U.S.
- There are 73 FQHCs in Texas with over 650 clinic locations
- FQHCs are non-profit organizations
- Serve in high-need areas
- Are led by members of the community

GATEWAY COMMUNITY Health Center, Inc.

- Gateway CHC takes care of patients with and without insurance.
- Gateway CHC has over 30,000 registered patients – 50% have insurance.

GATEWAY COMMUNITY Health Center, Inc.

Services Offered

Gateway CHC had over 100,000 visits in 2021.

Services include:

- Primary and preventive medical care
- Primary and preventive dental care
- Primary behavioral care
- Pharmacy
- Laboratory

GATEWAY COMMUNITY Health Center, Inc.

- Gateway CHC has four clinics in Laredo, TX
- One Clinic in Zapata, TX
- One Clinic in Hebbronville, TX
- One Mobile Unit
- Over 100 healthcare providers

We provide Quality Healthcare for Everyone!

GATEWAY COMMUNITY Health Center, Inc.

GATEWAY COMMUNITY Health Center, Inc.

Gateway Diabetes Institute

Mission Statement

"To Provide Quality, Comprehensive, Diabetes Medical Management, Education Support, and Prevention to Laredo and surrounding communities."

GATEWAY DIABETES INSTITUTE

GDI Institute Policies

- **Internal Structure**
  - Mission Statement
  - Annual Goals and Objectives
- **Advisory Board**
  - Meets 2-4 times per year
- **Department Coordination**
  - Training Schedule Form
    - Motivational Interviewing trainings
    - Trauma informed care trainings
    - Social Determinants of health
    - GDI Policies training
- **Standards of care**
  - ADA
  - AACE/ACE
- **Clinical Protocols**
  - Insulin Self-Management Policy
    - Basal Insulin
    - Split dose basal insulin
    - Mixed Insulin (70/30)
    - Rapid-acting Insulin
  - Uncontrolled Diabetes Patients (HbA1c >9%)
  - Pre diabetes
  - Future protocols:
    - Gestational Diabetes
    - Pediatric Diabetes Visits
- **Diabetes Standing Delegation Orders**
  - For medical Assistants
    - Lab Orders
    - Immunization Orders
    - Referral to Dental
    - Referral to DSMES/MNT
    - Off- Site Referral to podiatrist
    - Referral to diabetic supplies and Eye Exam
    - Smoking Cessation
- **Patient Education**
  - Referral Process
  - Standard Operating Procedures and Workflows for DSMES & MNT
    - Virtual Education
    - Facebook Support “Gateway Diabetes Institute”
  - ADA DSMES certification
- **Technology**
  - Continuous Glucose Monitoring (CGM) In-House Protocol/ Workflow
  - Glucose Testing Supplies Protocol
- **Quality Improvement**
  - CQI Worksheet
  - Quarterly measures

(Framework follows American Diabetes Association’s Standards for Accredited Diabetes Self-Management Education & Support Program)

GATEWAY COMMUNITY Health Center, Inc.

HRSA GOALS set in 2019

- QI project to improve access to Drug Assistance Program & referrals in rural clinical
- Point of care A1C testing, decrease number of missing A1C Values
- Motivational Interviewing training for providers & staff

“Know Diabetes By Heart” Initiative

Institute Performance Annual Outcomes

Date	12/31/19	12/31/20	12/31/21
Total Diabetes Patients	4895	4906	5266
# uncontrolled	1503	1444	1468
% Uncontrolled	30.7%	29.4%	**27.9%**

Improve on Missing A1Cs- A1C Point of Care

Date	12/31/19	12/02/20	12/31/21
Missing A1c	500	357	332
% Missing A1c	10.53%	7.74%	**6.16%**

"Know Diabetes By Heart" Initiative

Diabetes Drug by Class

2018						2019					2020			
Drug Class	**Q1**	**Q2**	**Q3**	**Q4**		**Q1**	**Q2**	**Q3**	**Q4**		**Q1**	**Q2**	**Q3**	Q4
Metformin	1717	1735	1720	1677		1788	1703	1836	1572		1673	1661	1535	1592
Sulfonylurea	1013	944	849	770		706	642	631	547		549	522	516	452
TZD	334	334	382	458		419	404	449	387		359	364	343	328
DPP4	478	334	477	496		548	513	558	503		530	475	481	457
SGLT2	306	289	311	340		389	403	403	447		500	560	570	629
GLP-1	143	159	152	170		193	208	265	249		335	404	415	441
Janumet	649	747	758	729		777	803	854	773		752	853	839	816
SU+ Met														
Inuslin	1062	1085	1056	1053		1214	1106	1154	1033		1104	1042	1014	990
Levemir						485	432	442	403					
Lantus						115	110	147	123					
Basaglar						29	20	23	25					
Tresiba						61	52	79	62		69			
Toujeo						11	7	12	11		22			
NPH						43	54	46	39					
MIX						266	250	216	200					
Novolog						132	123	131	116					
Humalog						30	26	34	35					
Fiasp						5	3	4	3					
Apidra							2	1	2					
R U 500						2	3	2	1					
R						35	24	17	12					
Total Insulin	0	0	0	0		1214	1106	1154	1032					

Change in prescribing trends by quarter.

2021 Service Objectives Met

- Implemented Diabetes Protocol for patients with A1C > 9% with all adult providers.
- Increased provider and patient awareness of cardiovascular health risk for patients living with diabetes.
- Participated in the “Know Diabetes by Heart” initiative sponsored by the American Diabetes Association and the American Heart Association, goals to achieve:
  - <25% of patients with A1C >9%
  - Increase statin therapy in patients with Diabetes and high LDL cholesterol to greater than or equal to 70 and less than 190 in >70% of patients
  - Manage Blood Pressure to < 140/90 in 70% of patients
- Recognition by the American Diabetes Association for meeting national standards for Diabetes Self-Management Education and Support.
  - Education modules added to meet need of special populations: children living with diabetes, gestational diabetes.
- CDC Recognized National Diabetes Prevention Program.

GATEWAY COMMUNITY Health Center, Inc.

Diabetes Self-Management Education & Support Expanded Services in 2021

- Courses available to ALL Gateway patients
  - Year-Round Education
  - Virtual sessions
  - Text support between classes
- Average wait time to classes -21 days after assessment with Diabetes Educator
- English Classes Added
- Class Outcomes
  - Average change in A1C **-1.67%**
- Facebook Page Support Program – Gateway Diabetes Institute

Integration of
Know Diabetes by Heart
and
Gateway Diabetes Institute

Know Diabetes by Heart™

GATEWAY COMMUNITY Health Center, Inc.

Program Implementation Goals

1,620 individuals enrolled in the Diabetes Support Program

3,343 individuals joined the ADAs online Living With Type 2 Diabetes

6,059 individuals received education on KDBH as single sessions

Know Diabetes by Heart™

GATEWAY COMMUNITY Health Center, Inc.

Intervention Strategies

- Partnerships
- Presentation to Healthcare Providers
- Presentation to Nutritionist and Registered Dietitian
- Training to Promotores de Salud/CHW
- Virtual one to one sessions
- Virtual group sessions
- Information booths
- Virtual health fairs
- Loteria
- Flipchart

Know Diabetes by Heart™

GATEWAY COMMUNITY Health Center, Inc.

Program Implementation

Partnerships

Support from faith-based organizations, education entities, social services agencies, businesses, and local associations

- South Texas Promotores Association
- Consulate General of Mexico in Laredo, TX
- Head Start Child Development Program
- United Way
- Maranatha Christian Church
- Centro de Fé Christian Church
- Senda de Gloria Christian Church
- Larga Vista Community Center
- Nuestra Gente Adult Daycare
- Esmeraldas Adult Daycare
- Holding Institute
- Families for Autism
- Ladrillito Community Center
- Buenos Dias Adult Daycare
- South Texas Training Center

Know Diabetes by Heart™

GATEWAY COMMUNITY Health Center, Inc.

Intervention Strategies

Registered dietitian

and nutritionist

are using the

Know Diabetes by Heart

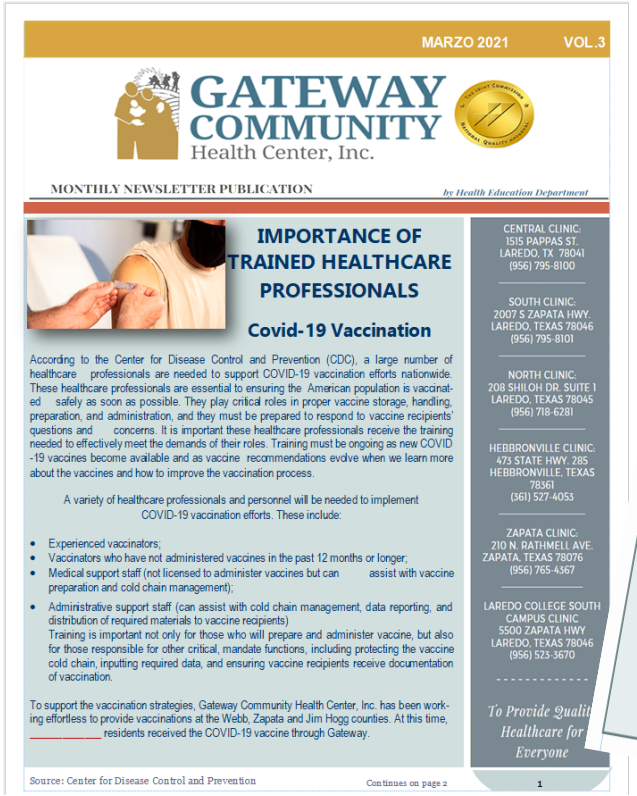
education materials and website

presentations with patients

Know Diabetes by Heart™

Intervention Strategies

Program Promotion



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GATEWAY COMMUNITY Health Center, Inc.

MONTHLY NEWSLETTER PUBLICATION

by Health Education Department

IMPORTANCE OF TRAINED HEALTHCARE PROFESSIONALS

Covid-19 Vaccination

According to the Center for Disease Control and Prevention (CDC), a large number of healthcare professionals are needed to support COVID-19 vaccination efforts nationwide. These healthcare professionals are essential to ensuring the American population is vaccinated safely as soon as possible. They play critical roles in proper vaccine storage, handling, preparation, and administration, and they must be prepared to respond to vaccine recipients' questions and concerns. It is important these healthcare professionals receive the training needed to effectively meet the demands of their roles. Training must be ongoing as new COVID-19 vaccines become available and as vaccine recommendations evolve when we learn more about the vaccines and how to improve the vaccination process.

A variety of healthcare professionals and personnel will be needed to implement COVID-19 vaccination efforts. These include:

- Experienced vaccinators;
- Vaccinators who have not administered vaccines in the past 12 months or longer;
- Medical support staff (not licensed to administer vaccines but can assist with vaccine preparation and cold chain management);
- Administrative support staff (can assist with cold chain management, data reporting, and distribution of required materials to vaccine recipients)

Training is important not only for those who will prepare and administer vaccine, but also for those responsible for other critical, mandate functions, including protecting the vaccine cold chain, inputting required data, and ensuring vaccine recipients receive documentation of vaccination.

To support the vaccination strategies, Gateway Community Health Center, Inc. has been working effortless to provide vaccinations at the Webb, Zapata and Jim Hogg counties. At this time, _____ residents received the COVID-19 vaccine through Gateway.

CENTRAL CLINIC:
1515 PAPPAS ST.
LAREDO, TX 78041
(956) 795-8100

SOUTH CLINIC:
2007 S ZAPATA HWY.
LAREDO, TEXAS 78046
(956) 795-8101

NORTH CLINIC:
208 SHILOH DR. SUITE 1
LAREDO, TEXAS 78045
(956) 718-6281

HEBBRONVILLE CLINIC:
473 STATE HWY. 285
HEBBRONVILLE, TEXAS 78361
(361) 527-4053

ZAPATA CLINIC:
210 N. RATHMELL AVE.
ZAPATA, TEXAS 78076
(956) 765-4367

LAREDO COLLEGE SOUTH CAMPUS CLINIC
5500 ZAPATA HWY
LAREDO, TEXAS 78046
(956) 523-3670

To Provide Quality Healthcare for Everyone

Source: Center for Disease Control and Prevention

Continues on page 2

Know Diabetes by Heart™

American Heart Association.

American Diabetes Association. Connected for Life

Joining Forces and Empowering Communities

Know Diabetes by Heart™ Awards $900,000 for Community Education

Ten grants from the American Diabetes Association and the American Heart Association's joint Initiative aim to decrease heart disease and stroke among people with type 2 diabetes

ARLINGTON, Va., DALLAS and Laredo, Tx., March 31, 2021 – The American Diabetes Association® and the American Heart Association® have awarded up to $900,000 to organizations to help people living with type 2 diabetes lower their risk for cardiovascular diseases like heart attack, heart failure and stroke. Gateway Community Health Center, Inc. is thrilled to be among the list of grant recipients.

The community grants are part of the leading health non-profits' joint Know Diabetes by Heart™ initiative which seeks to reduce cardiovascular events and deaths among people with type 2 diabetes. The grants will help organizations in 10 states deliver diabetes and cardiovascular disease education materials and resources. Outreach efforts will focus on engaging Black and Latino populations which experience higher rates of diabetes, heart disease and stroke compared to non-Hispanic white populations.

Cardiovascular disease remains the leading cause of death and a major cause of disability for all people living with type 2 diabetes, yet only about half age 45 or older understand their increased risk for developing heart disease or have discussed it with their doctor.

"Knowledge is power and arming these community organizations with resources and accessible information is key for people with type 2 diabetes to better understand their elevated risk for heart disease and stroke," said Robert A. Gabbay, MD, PhD, FACP, chief scientific and medical officer for the American Diabetes Association. "We are pleased to work with these 10 organizations who are dedicated to improving the health of their communities to get the information into the hands of those who need it most.

"This is a good time to protect yourself from diabetes-related heart disease and COVID by making lifestyle changes that can help you improve your overall health and better manage your diabetes. It's good for your heart health and kidney health and will contribute to a longer, healthier life," said Eduardo Sanchez, MD, MPH, FAAFP, the American Heart Association's chief medical officer for prevention.

Gateway Community Health Center considers that raising awareness, educating, and supporting people to take action to manage diabetes and cardiovascular disease will not be possible without the strong support of allies. Gateway recognized the great efforts from the American Diabetes Association and the American Cancer Society to addressed the national public health impact of type 2 diabetes and cardiovascular disease; and is very fortunate to be one of the ten organizations nationwide selected to be part of the Know Diabetes by Heart Initiative.

3

Education Tools

Lotería

Flipchart

Success Story

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Meal planning is key to accomplish the goal of managing diabetes. Mr. Chapa invests time on preparing healthy meals for his breakfast, lunch and dinner every day .

Gateway Diabetes/CVD Self-Management

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- Gateway's Diabetes and Cardiovascular Disease Self-Management (CVD) guide was designed to address the seriousness and prevalent chronic health conditions of diabetes and cardiovascular disease.

- The goal of the guide is to provide an effective training by utilizing a community-based and culturally sensitive approach to support individuals in the prevention and management of diabetes and cardiovascular disease.

Structure

- The guide promotes participation to make the learning process an enjoyable activity. The guide is adaptable to the needs and resources of organizations working towards a common goal of health education and disease management.

- The ten-session course is designed to be offered in a 2-hour session for ten consecutive weeks. The sessions include topics on nutrition, portion control, physical activity, diabetes and CVD complications, self-monitoring, medication and stress management.

- The versatility of this guide is such that it may be used by healthcare professionals, health educators, and community health workers (Promotores).

Module 4: Exercise to better health

Objectives:

By the end of this session, participants will:

- Know the benefits of regular exercise and how they relate to managing chronic illness;
- Know the difference between physical activity and exercise;
- Understand The "F-I-T" Concept;
- Know the precautions that one must take before and during exercise;
- Learn the 4 (Four) types of Exercise;
- Learn the "Sit and Be Fit" exercises.

Materials

- Flip Chart
- Markers
- Pencils/Pens
- Name Cards
- Stickers
- Balloons
- CD Player
- Music CD
- Cards for the "Four Types of Exercise" Activity. (See Activity "B")
- "Sit and Be Fit" guide
- Refreshments

Outline

1. Meet, Greet, and Introduce
2. Goal review
3. Discussion: Learning the difference between physical activity, exercise, and the "F-I-T" concept
4. Discussion: Benefits of exercise
5. Discussion: Exercise safety
6. Engage in Group Activity A: "Balloon War"
7. Discussion: Obstacles to exercising
8. Engage in Group Activity B: "Four types of exercise"
9. Engage in Group Activity C: "Sit and be fit"
10. Handout distribution
11. Closing

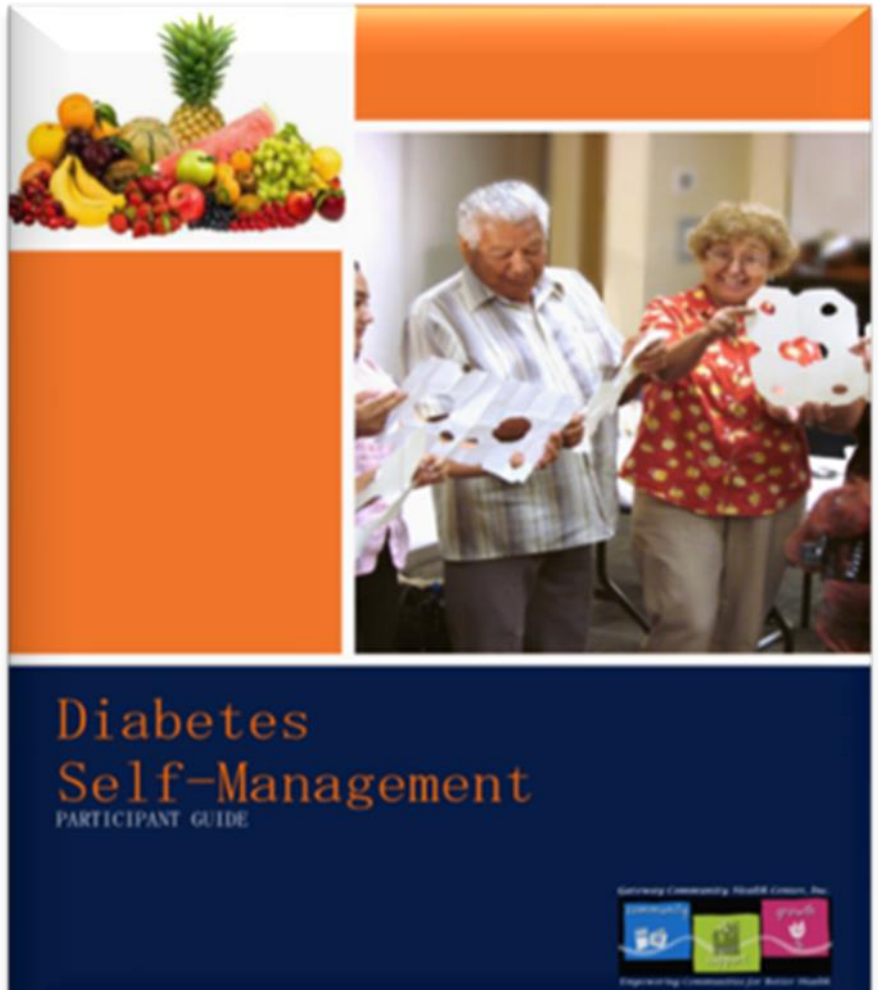
Forms

- Goal setting form
- Attendance sheet/sign-in-sheet

Handout distribution

- "Sit and be fit" guide
- "Exercise and stress"

Principles



The guide was developed by incorporating years of experience and eight self-management principles:

- Active Learning
- Goal Setting
- Problem Solving
- Knowledge
- Responsibility
- Social Support
- Respect
- Skills Building

Outline

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Activity Examples

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Evidence Base

Goal:

- Diabetes Management: Ensure that the proportion of diabetic adults with an HbA1c value **greater than 9 percent, is at or below 34%** (Medicaid 75th percentile) by the end of the year. Medicaid 90th percentile, 28%).

- Hypertension Control: Ensure that the proportion of hypertension adults whose **blood pressure is under control (systolic blood pressure <140 mmHg and diastolic blood pressure <90mmHg) is at 64%** (Medicaid 75th percentile), by the end of the year. (Medicaid 90th percentile, 79.6%).

Results:

- Diabetes: Total Sample **(N=1095)**

  Outcome: 21% (231) of the patients had an HbA1c greater than 9%.

- Hypertension: Total Sample **(N=934)**

  Outcome: 73% (682) of the patients had their Blood Pressure under control.

Fiscal Year 2021

Best Practices

- **GCHC has integrated promotores (community health workers or CHW) into the care team and developed a training model and curriculum tailored to the patient population.** The program covers a number of disease states including, diabetes, hypertension, and cancer. This program can help the following initiatives:

- UDS clinical measures (specifically diabetic A1c, hypertension BP <140/90, cancer screening);
- Meaningful Use clinical quality measures, which has now been rolled into the MACRA QPP Program;
- Patient Centered Medical Home; and Potentially, Healthy People 2020 diabetes objectives.
- **A health education/CHW Program in and of itself would not be a Best Practice. But, in addition to increasing patients' health literacy and knowledge of their chronic diseases and importance of preventive services, the program incorporates the following aspects that are unique to community health worker programs:**
- **Holistic approach to improving quality of life**: The program has developed a number of engaging activities to teach patients about their disease and how to manage it. The way the activities were structured is what was particularly striking. Staff use activities to not only teach health topics, but to teach participants skills, such as public speaking, problem solving, negotiation, and managing stress that will affect all aspects of their life. These skills not only positively impact adverse social determinants of health, but they provide participants self-confidence and help to improve their overall quality of life.

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Best Practices

Workforce Development: The promotores program has been approved by the Texas DSHS CHW program. It incorporates the following eight competencies: communication skills, interpersonal skills, service coordination, capacity building, advocacy, teaching skills, organizational skills, and knowledge base. As the primary provider workforce does not meet current demand for services, having appropriately trained staff to help patients is vital, and this program allows for development of staff without extensive formal education to make a positive impact on their community and in their own lives.

Source: This report has been prepared on behalf of the Health Resources and Services Administration, Bureau of Primary Health Care (HRSA/BPHC) for the purposes of oversight and guidance of HRSA/BPHC programs. The report contains final findings and recommendations reviewed and approved by HRSA/BPHC.

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Thank you!