Georgia Hospitals Combating Diabetes in the Community

November is National Diabetes Month, a time to bring attention to diabetes and the impact it has on millions of Americans, especially in the state of Georgia. GHA will feature a three-part series on different approaches to reducing the diabetes incident rate.

Georgia hospitals are working hard to reduce the diabetes incident rate in their communities. In a recent review of Community Health Needs Assessments, more than half of Georgia hospitals selected diabetes as a focused community initiative.

The GHA Research and Education Foundation (GHAREF) has partnered with the Georgia Department of Public Health (DPH) to assist health systems in reducing the diabetes incident rate. Health systems in Georgia are being recruited to either implement the CDC-led National Diabetes Prevention Program (DPP) or start a Diabetes Self-Management Education and Support (DSMES) program within their organizations. The DPP brings evidence-based lifestyle change programs to local communities and motivates individuals to make lifestyle changes to reduce the progression to Type 2 Diabetes. DSMES helps people with diabetes improve health outcomes. Read more about these efforts.

Tanner Medical Center and Floyd Medical Center are the only two facilities in Georgia to receive the full DPP recognition.

Floyd Medical Center’s education and corporate health departments joined together to offer diabetes screenings around the community to identify individuals at risk of developing diabetes. Also, a series of outpatient classes are offered to the community to teach individuals the benefits of self-management. Floyd staff also receive DPP training to provide diabetes education classes to employees.

Tanner Medical Center offers free DPP classes to staff and the community. The program gives participants resources reduce the risk of developing Type 2 diabetes. Additionally, participants meet with a certified instructor to better understand diabetes and how to live a healthy life.

Several health systems and hospitals are working toward achieving full DPP recognition status, including:

- Emory Healthcare
- Northeast Georgia Medical Center
- Phoebe Putney Health System
- Piedmont Columbus Midtown
- Kaiser Permanente

GHA and the Georgia DPH have a goal to enroll 10 hospitals per year for the next three years into either the Diabetes Prevention Program or the Diabetes Self-Management Education and Support program. Health systems interested in implementing the DPP or the DSMES program should reach out to Tyra Brown at tbrown@gha.org for more information.
National Diabetes Month

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Effective Glycemic Control in Hospitals

GHA is intent on improving many of the hospital quality measures through the Centers for Medicare and Medicaid Services’ (CMS) Hospital Improvement Innovation Network (HIIN) through a partnership with the American Hospital Association. Often, hospitals are overwhelmed with the number of comparison groupings, differing benchmarks and time periods. To decide which clinical measure to highlight first, hospitals should determine which measures 1) have the highest (worst) rates; 2) affect the most patients; 3) are trending in the wrong direction; 4) are the least likely to be met at the national benchmark; and 5) are the most costly.

The response of many hospitals will be low blood sugar (care of the diabetic patient): hypoglycemia is most prevalent in hospital inpatients that have received insulin. Hospitals in the Georgia HIIN report greater than 500 severe hypoglycemia events monthly, and greater than 6,500 annually.

The key to managing glucose should not be viewed as a simple, one-size-fits-all approach. Experts suggest using best practice guidelines to effectively manage low blood sugar among patients:

- Identify blood sugars less than 70 mg.
- Establish a defined blood sugar control range between 140 mg and 180 mg.
- Analyze hospital data and identify if higher prevalence is coming from a specific physician, unit such as an OR, step-down or otherwise.
- Provide additional staff education on the care of diabetic patients.
- Offer insulin drips for critically ill patients or surgical patients with glucose greater than 180 mg.
- Use the Hypoglycemia Process Improvement Discovery tool.

Providers are advised to take a comprehensive, scientific approach when establishing diabetes management care plans.

For more information contact the GHA HIIN Hospital Contact.
CATAPULT Model Improves Diagnosis and Care for Chronic Conditions

November is National Diabetes Month, a time to bring attention to diabetes and the impact it has on millions of Americans, especially in the state of Georgia.

Georgia hospitals are improving diagnosis and quality of care for chronic conditions with the CATAPULT health care model. A framework created by the Georgia Department of Public Health (DPH), the 8-component model (Commit to Participating; Assess Your Practice or System; Training; Activate Your Community Resources; Prepare Your Action Plan; Leverage Your Data; Test and Implement Your Approach) creates a standardized approach to improving management of hypertension, diabetes and other related conditions.

GHA partnered with DPH to recruit hospitals and health systems to participate in CATAPULT. The aims are to improve hospital and health system performance measures; build a community of health care providers engaged in continuous quality improvement; reduce hospitalizations for a) Type 2 diabetes by 25 percent and b) hypertension by 10 percent by 2020. Over the next three years, 30 health systems have the opportunity to participate in CATAPULT.

The first 10 Georgia hospitals participating in the program are:

1. Bacon County Hospital and Health System
2. Burke Medical Center
3. Coffee Regional Medical Center
4. Colquitt Regional Medical Center
5. Elbert Memorial Hospital
6. Houston Healthcare
7. Memorial Hospital and Manor
8. Medical Center of Peach County, Navicent Health
9. Navicent Health
10. Navicent Health Baldwin

“CATAPULT provides our hospitals with an evidence-based lifestyle change program that can cut the risk of developing Type 2 diabetes in half. Now, participants have access to free classes that help to make lasting changes to fight the key risk factors of diabetes,” stated Vicki Lewis, president and CEO of Coffee Regional Medical Center.

Hospitals and health systems interested in implementing CATAPULT should contact Tyra Brown at tbrown@gha.org.