

# Engaging Clinicians for the DPP Lifestyle ▶ Change Program

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# Prediabetes

- ▶ 96 million adults est'd. to have prediabetes
  - ▶ ~ 80% don't know they have it
- ▶ **Virginia**: 2,208,000 people (> 30% of the adult population) have prediabetes
- ▶ Around 5 – 10% of people with prediabetes ( $A_1c > 5.9$ ) become diabetic annually.



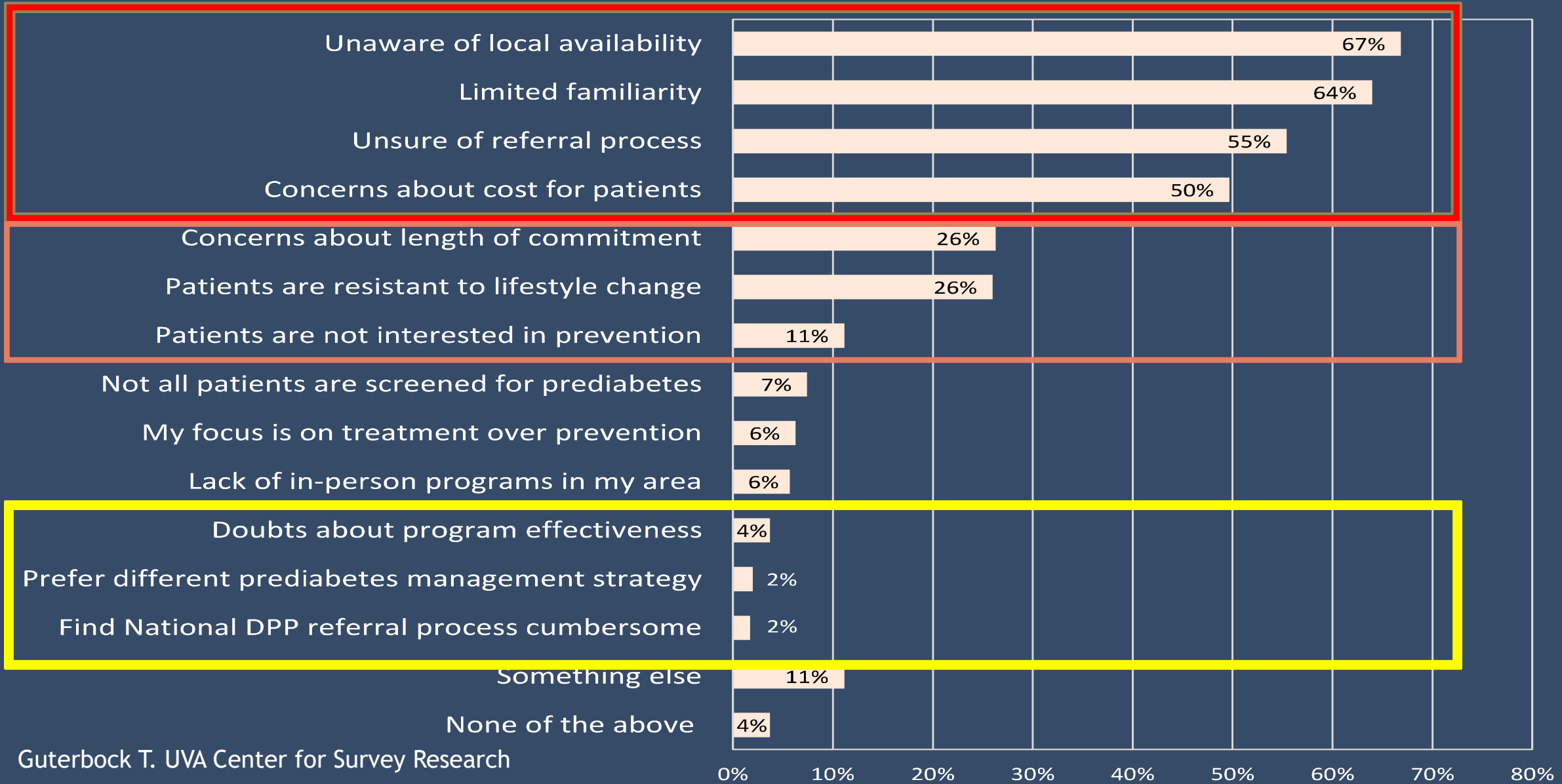
# The Challenge of Prediabetes for physicians

- ▶ Widespread
- ▶ Hard to motivate patients
- ▶ Many other issues
- ▶ Lack of interest by most health systems (v Bariatric surgery)
- ▶ Awareness of resources
- ▶ Staff
- ▶ EMR
- ▶ Medications
  - ▶ Expensive
  - ▶ Side effects
  - ▶ Insurance barriers
  - ▶ Can we medicate our way out of prediabetes?

# Awareness of National *DPP LCP* by clinicians

- ▶ 22% of clinicians have heard of *National DPP*
- ▶ Of those aware:
  - ▶ > 50% were positive about the program
  - ▶ About 50% had discussed the National *DPP LCP* with patients
  - ▶ Over 50% did not know if their system was set up to facilitate a referral
  - ▶ < 30% had referred a patient

# Barriers to Referring Patients



# Opportunities

- ▶ You offer something incredibly valuable
- ▶ DPP aligns with a variety of incentives
- ▶ DPP supports their care
- ▶ You can make it easier
- ▶ Remember:
  - ▶ It's not what is important to you, it's how to help them recognize how it is important and helpful to them
  - ▶ Most Clinicians want to provide their patients with these resources – we have to help make it easy to do so.

# You can offer answers to the top 7 issues

- ▶ Low cost
- ▶ Increase awareness of available programs
- ▶ Describe the great program you offer
- ▶ Present your data and the state data - Patients who are referred to you have a high rate of completion
- ▶ Bring materials about the program from CDC, VDC, et al.
- ▶ Describe your approach to engagement with and retention of patients
- ▶ Offer an easy referral process

# Key points for clinicians:

- DPPLCP extends what they want to teach in their office
- DPPLCP's benefits are evidence based (provide literature)
- Address costs of National DPP LCP
- Provide an easy one-page referral process – FAX and email
- Sample verbiage for A1c result management and referral
- Can help meet quality goals for DM, HTN, cholesterol
- Community based and supported – **unlike** commercial programs



# Approach: Focus on the entire care team

- ▶ Front Office
- ▶ **Nursing Staff**
- ▶ Clinicians
  - ▶ Physicians
  - ▶ NPs /PAs

## Steps to engagement

1. Intro letter to clinicians, practice administrator and nurses;
  - 1-2 page backgrounder
  - Contact information
2. Present program as a benefit for patients with prediabetes

# Steps to engagement

1. Ask to meet with the Nurse lead and develop an in-service for the nursing staff.
2. Provide materials and establish a time that works for their team
3. Offer to present at a staff or clinician meeting – 5-10 minutes.

# Steps to engagement

1. Offer a breakfast or lunch for practice
2. Fruit or healthy nutrition basket
3. Provide one-page referral form as well as a sample form that shows ease of use.
4. “Bring Bling”
5. Provide a fillable pdf order (e.g., VDH version)
6. Sample EMR tools

# Sample Verbiage as Smart Phrase from MD to patient

- ▶ I want to make you aware of the Diabetes Prevention Program which has been shown to reduce the risk of progression to diabetes by almost 60%. This is a local program that can help you get your blood sugar, weight and overall health in much better shape.
- ▶ It is a 6-month program with ongoing support for a full year, to be sure you have the help you need.
- ▶ The program is offered by \_\_\_\_\_
- ▶ Their contact information is \_\_\_\_\_
- ▶ Let them know I am referring you.
- ▶ Please give them a call. You are worth it.

# Content of interaction

- ▶ Positive – “glad to be here!”
- ▶ Background materials on DPP
- ▶ Testimonials / real patient examples
- ▶ Examples of quick referral.
- ▶ Suggest “just one referral a week”
- ▶ “Look at your schedule of HTN, Cholesterol, Obesity, or Prediabetes – to whom could you mention the program?”
- ▶ “Where would this fit into your care of patients with prediabetes?”
- ▶ Leave brochures that they can provide to patients.

## Engagement tip - Practice *Active Listening*

- ▶ Clinicians facing challenges with scheduling appointments, lockdowns and backups, adjusting to virtual health care.
- ▶ Shortages in supplies and drugs.
- ▶ Likely distressed that they can't guarantee patients will get everything they need for optimal treatment
- ▶ Rather than rushing in ready to make their pitch, **practice active listening**. You are listening to them and their goals for patients, their challenges and barriers. Demonstrates you are trustworthy and have strong interpersonal skills to maintain a positive relationships.

## Engagement tip - Practice *Active Listening*

- ▶ Listen before speaking.
- ▶ Respond by repeating their points of concern, ask clarifying questions, receptive body language and short affirmations
- ▶ Consider taking visit notes for 5-10 meetings.
- ▶ Summarize what you took away from the meeting and where you can address their needs.
- ▶ Send a follow up note to the physician, mentioning the ways the DPP can help address the issues they identified. Ask for any clarification they need.



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# Follow up!

- 2 weeks to solidify contacts.
- Another reminder or visit in 4 weeks.
- Keep in touch with nursing staff!

# Follow up

- ▶ Send thank you notes for referrals
- ▶ Keep in touch with nurses - ask for questions and ideas
- ▶ Provide samples of materials on a regular basis.
- ▶ Send progress reports.
- ▶ Be sure participants have follow-up visit with their physician in 3-6 months.

# Create and use your networks

- ▶ Identify champions among physicians and APPs
- ▶ Share successes with colleagues
- ▶ Help patients send updates to their PCPs
- ▶ Consider Community resources to let people know about the program - Community Centers, Public TV, Boards on Aging, Fitness Centers

# Sample update

Dear Dr. \_\_\_\_\_

Thank you for recommending the DPP Lifestyle Change Program!

My coach(es) have been \_\_\_\_\_

So far I have attended \_\_\_\_\_ sessions and have been able to

- Lose \_\_\_\_\_ pounds
- See my blood pressure improve
- Improve my diet
- Learn much more about recommended lifestyle changes

I am looking forward to seeing you at our follow up visit.

Appreciatively,

\_\_\_\_\_

# Summary

- ▶ You offer something incredibly valuable
- ▶ DPP aligns with a variety of incentives
- ▶ DPP supports their care
- ▶ Engage with active listening
- ▶ Use/create your networks
- ▶ Identify physician champions
- ▶ You can make it easier