

**Florida Alliance for Diabetes Prevention and Care  
Leadership Council Quarterly Meeting  
January 10, 2006**

**MINUTES**

**Members Present**

Pauline Ellis, American Diabetes Association - Florida  
Mike Hill, Northwest Florida and Big Bend Health Councils, Inc.  
Amy Waller, Plantation General Hospital  
Ed Shahady, MD, Florida Association of Family Physicians  
Ferdinand Richards, MD, Florida Medical Quality Assurance (FMQAI)  
Phyllis Bruno, Cleveland Clinic

**Guests**

Kathie McDonald, FMQAI  
Marilyn Banlowe, student

**Diabetes Prevention and Control Program (DPCP) Staff**

Tammie Johnson  
M.R. Street

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**I. Welcome and Announcements**

Ms. Ellis called the meeting to order at 12:30 p.m.

Ms. Street asked those participants requesting reimbursement to complete their vouchers and turn them in to her today. She also stated that the worksheets, along with a receipt, must be sent in within the next two weeks at the latest. If no receipts, signed worksheets can be turned in today.

**II. Minutes**

Dr. Shahady moved to approve the minutes of the November 8, 2005 meeting. Dr. Richards seconded. The minutes were approved unanimously.

**III. Reports of officers, boards, and standing committees**

A. Chair: Mr. Lombardo (Not present)

B. Chair-elect: Ms. Ellis (None)

C. Past chair: Dr. Deeb (Not Present)

D. Community Partnerships Committee: Ms. Bruno

Ms. Bruno stated that Bonnie Mason, Ms. Street and herself met with the Committee. She stated that some lists were developed (a list of endocrinologists in the state, a list of CDEs [Certified Diabetes Educators], members of the AADE and members of the FFADE). Invitations to join the Alliance were sent out by Ms. Street to everyone on the lists. There are currently 170 members in the Alliance.

No other lists have been received, so committee members are asked to send the invitation to their contacts. The following persons, organizations or entities should be canvassed for potential membership and trained trainers and/or persons interested in becoming trainers:

County Health Departments  
Florida colleges and schools of nursing

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Student nurse associations at colleges and universities  
Hospital Quality Improvement liaisons for health care provider organizations  
Family Practice, Internal Medicine and Geriatric practitioners and ARNPs  
Network 7, people who do Medicare contacts for patients diagnosed with end-stage renal disease and undergoing dialysis  
Pharmaceutical students at Nova Southeastern University (Karen Daniels, Instructor)  
Pharmaceutical companies that employ certified insulin pump trainers  
Florida Registered Dietitians  
Florida's 67 school district administrators in charge of the required Life Management and Wellness curricula. These courses are required by statute to graduate high school.  
Medical Quality Assurance Division, Florida DOH (request contact information for licensed practitioners)

Note that the DPCP budget does not have funds to cover the cost of a large-scale mail out. (A 125,000-piece postcard mail out costs approximately \$24,000.) The Leadership Council could partner with another entity that currently does bulk mailings to its membership to include Council recruiting materials as a part of its mailings.

A tag line will be added to the postcard that is being developed for use by the DPCP. Diabetes Alliance membership recruitment materials will be included with the Marco Island ADA Southern Regional conference registration confirmation packets for Florida attendees. The DPCP will include Alliance recruitment materials at its booth at the ADA conference.

It was suggested that a calendar of meetings hosted by statewide organizations be developed and that the Alliance exhibit at one meeting per year for each major healthcare organization.

E. Data Committee: Dr. Richards

Dr. Richards reported that since the last meeting, Dr. Jifeng Ma had developed data sets to try and target areas in the state that had been amenable to dedicating resources to train the trainer activities for diabetic education and self-management. The data set were developed using available Medicare data.

Dr. Ma presented the results data on underserved diabetic Medicare populations. The data used for developing the maps was collected from Medicare claims filed from October 2002 to September 2004 (a three-year time period). No outcome data was available so process measures were used in the study. Thus we have the overall rates for the three indicators (eye exams, lipid profiles and hemoglobin A1Cs) and for the underserved population. The use of these data sets allows staff to correlate rates between eye exams and other diabetic tests and perform comparisons statewide by county to identify underserved areas. While this data is based on Medicare data it was reported that, of the 1.1 million diabetics in Florida, 80 percent (approximately 800,000) were Medicare recipients and that, in the state's managed care population, 20 percent of patients are diabetic.

Ms. Johnson suggested that the Alliance use the study data to determine where to concentrate efforts to get the desired result and to pilot studies. Her studies of the state population-based information showed that higher rates of formal diabetes education drive the other indicators up. Incidences of eye exams, foot exams and

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A1C measures were two to three times higher than for those who do not receive education. The biggest problem is that there are large pockets in the state where there is not a diabetic educator within a 100 miles or a diabetic program within 50 miles.

Dr. Richards agreed to email the presentation to Ms. Street for distribution to the Leadership Council.

F. Education Committee: Amy Waller

The committee has focused its planning efforts on the professional group to begin providing education and training activities, including the possibility of holding three or four training/education sessions per year in different locations around the state. A meeting piggybacked on the ADA Southern Regional Conference on May 25, 2006 will be a pilot. Unfortunately, it is too late to process a request for CMEs and CEUs, so participation may be affected. The Education Committee will develop a request for mini-grant funding through the DPCP to assist in funding the symposium. The deadline to make the request is March 15, 2006.

Ms. Waller requested input from the members of the Leadership Council regarding a pilot program for educational activities involving lay people. The committee had earlier discussed the DPCP providing Train the Trainer activities.

Ms. Johnson reported that the DPCP is in the process of finalizing community health activities to provide the train the trainer activities prior to June 30, 2006. The DPCP is planning three train-the-trainer programs. One training session will be in the Tallahassee area, one in Miami-Dade, and one in Tampa or Orlando before June 30. There is no charge for the training, and travel stipends may be offered. The training will be limited to 20 people per session and that there will be an application process for selection to receive the training. The application process will require the applicant to state how the training will be used. (Who will the participants train? There has to be a plan for using the training.) The DPCP hopes to have funding for a few mini grants to help some of the areas with greatest need build infrastructure. Based on the discussion, the Education Committee will postpone its training activities for lay people until a cadre of trainers is trained and available to assist in providing the community based training. A discussion followed on how to implement training within communities. It was suggested that the Alliance could identify potential training venues and provide linkages to establish ongoing training activities.

Dr. Shahady suggested that the Alliance could identify potential training venues and provide linkages to establish ongoing training activities. He also added that we should make clinicians aware that the community has this resource available to provide training to community health workers. He also said he hoped that many of the people who receive the train the trainer education live in communities not served by CDEs. Ms. Johnson said that while the training is not the level required to obtain CDE certification it is at a level that will train people in the community to help people better manage their diabetes. The train-the-trainer program is more cost effective than CDE training and gets the community health worker out in their communities. The physician members of the Alliance are vital to getting clinicians to buy into the process.

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**IV. Old business**

A. Alliance Bylaws:

After section-by-section changes to the bylaws, Mr. Hill made a motion to approve the bylaws as corrected. Dr. Shahady seconded the motion and it was approved.

Ms. Ellis thanked Ms. Street for her work on drafting the bylaws.

**V. New business**

A. Attendance at Meetings:

Ms. Ellis expressed concern that attendance at the Leadership Council meetings had declined and suggested that additional meeting notices may improve attendance. Ms. Ellis suggested that the Council needed a process in place to notice meetings at least 30 days in advance. This notice would contain no attachments and would only be an "Our next meeting is... and contain the who, what, where and when information. This notice is to be followed by a seven-day notice and another notice the day before the meeting. Ms. Johnson suggested sending out the long-term meeting calendar with dates indicated through 2010. Ms. Ellis suggested this was too far in advance and suggested a calendar for a period of three years. Ms. Ellis also suggested that people be asked to RSVP if they were going to be attending. Ms. Johnson also stated that meeting attendance was the responsibility of those members who were not present.

B. Announcements

- 1) Florida Disability Task Force: The Florida Disability Task Force will hold a meeting at the Embassy Suites in Tampa, Florida January 30-31, 2006.
- 2) American Heart Association: The American Heart Association (Cardiovascular Health Advisory Council) is holding a meeting February 10, 2006 in Tampa.

**VI. Public comment**

No public comment.

**VII. Adjournment**

The next meeting will be held in Marco Island May 25, 2006.

The meeting was adjourned at 4:40 p.m.