

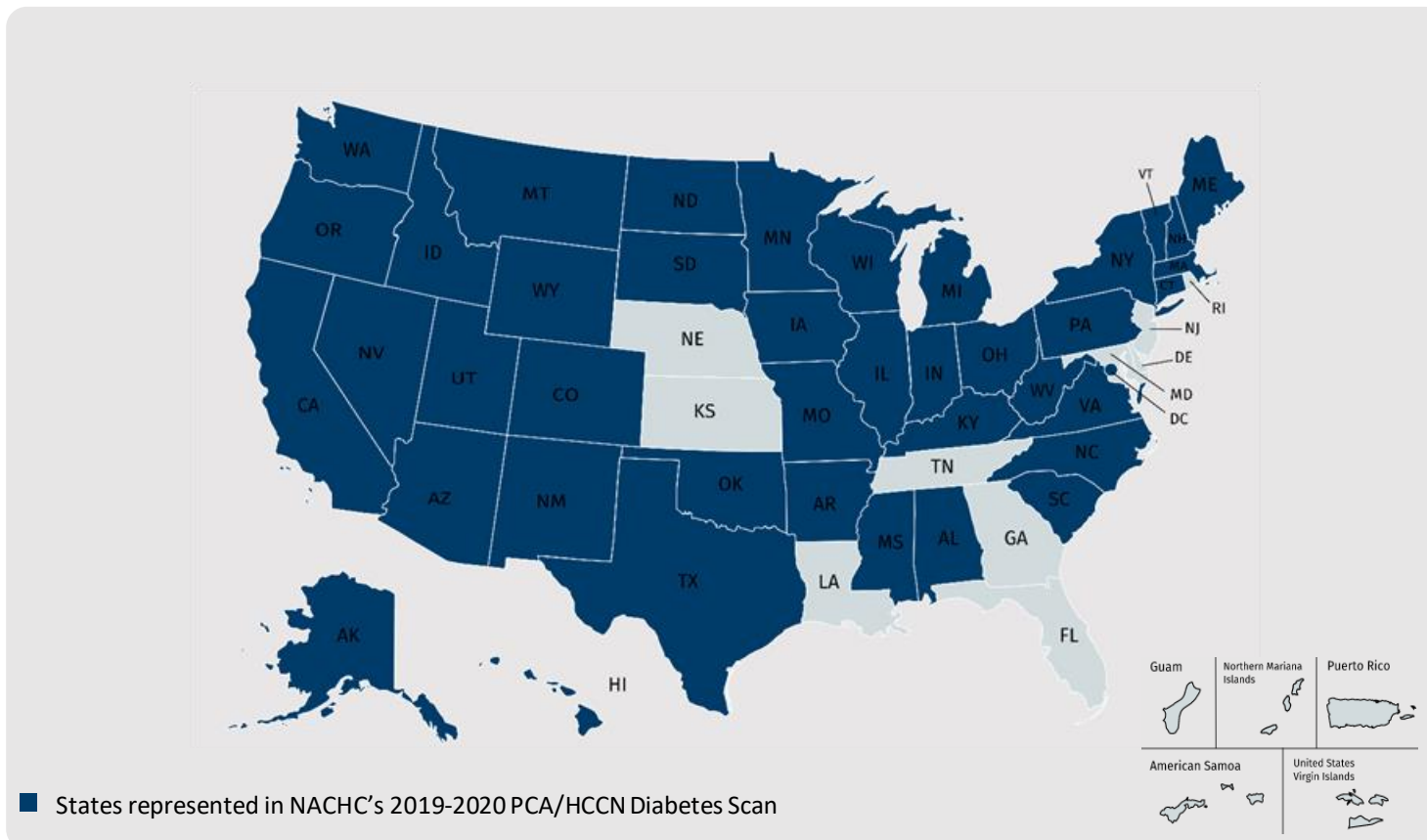
2019-2020 PCA/HCCN DIABETES SCAN RESULTS

In August 2019, NACHC's Quality Center conducted an environmental scan of diabetes efforts among primary care associations (PCA) and health center controlled networks (HCCN) nationally. NACHC sent a set of questions to 57 organizations (23 PCAs, 14 standalone HCCNs, and 20 PCAs with an HCCN designation) to better understand existing diabetes initiatives at the local, state, and national levels. Forty-four organizations (77%) responded. This included 20 PCAs, 7 standalone HCCNs, and 17 PCAs with an HCCN designation in 40 states and the District of Columbia. The question set gathered details on the focus of diabetes work, funders, partners, and obstacles in implementing diabetes initiatives. In addition, NACHC asked participants of the scan to provide input on their efforts around a specific set of evidence-based interventions presented in NACHC's Diabetes Change Package to potentially serve as resources in upcoming NACHC educational offerings.

44 PARTICIPANTS

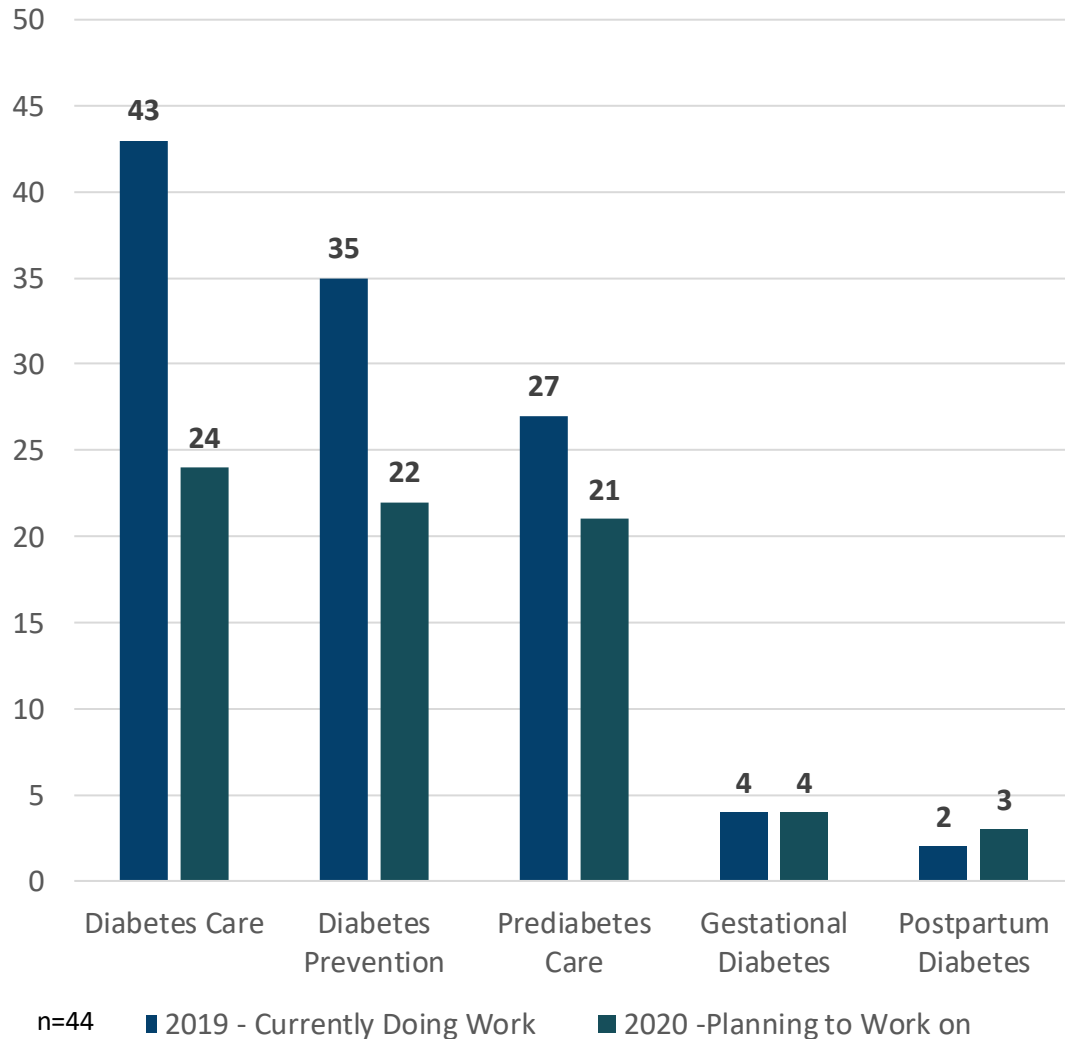
40 STATES & DC

77% RESPONSE RATE



2019-2020 PCA/HCCN DIABETES SCAN RESULTS

Figure 1: Number of PCAs/HCCNs Reporting Diabetes Efforts including Focus Area, 2019-2020

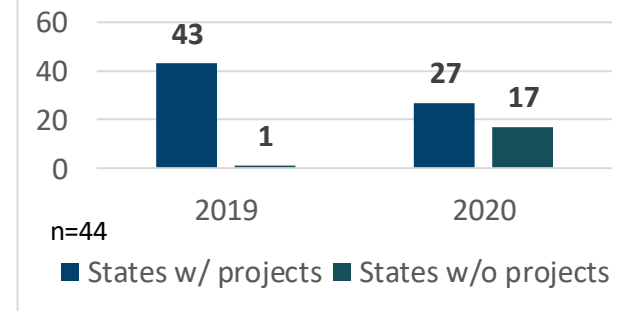


Current Trends

Participating PCAs/HCCNs provided information on current (2019) and planned (2020) diabetes efforts across five focus areas: diabetes prevention, diabetes care, prediabetes care, gestational diabetes, and postpartum diabetes. PCAs/HCCNs reported an expected decrease in the number of health centers working on diabetes prevention, diabetes care, and prediabetes - 19, -13, and -9, respectively (Figure 1). Activities around gestation diabetes were projected to stay level. The number of PCAs/HCCNs reporting current/planned activity in the area of postpartum diabetes is small but expected to increase by 50%.

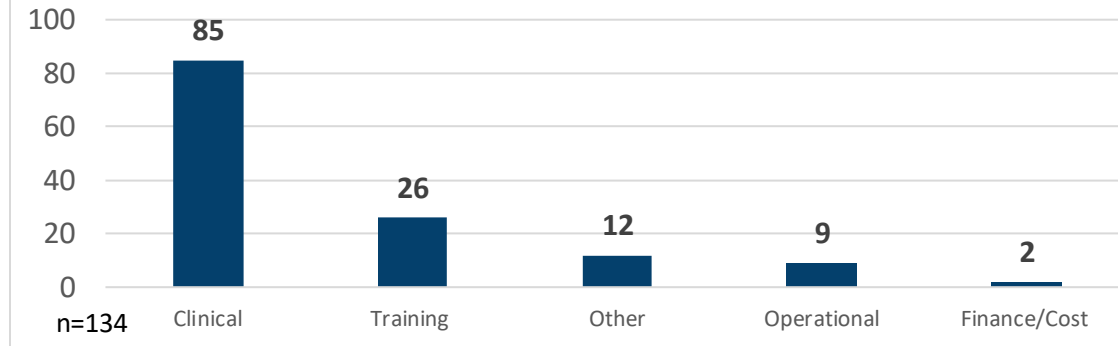
Overall, in states with current diabetes efforts in these five areas, there is an expected decrease of 37% in number of diabetes projects from 43 in 2019 to 27 in 2020.

Figure 2: PCAs/HCCNs Engaged in Diabetes Efforts



2019-2020 PCA/HCCN DIABETES SCAN RESULTS

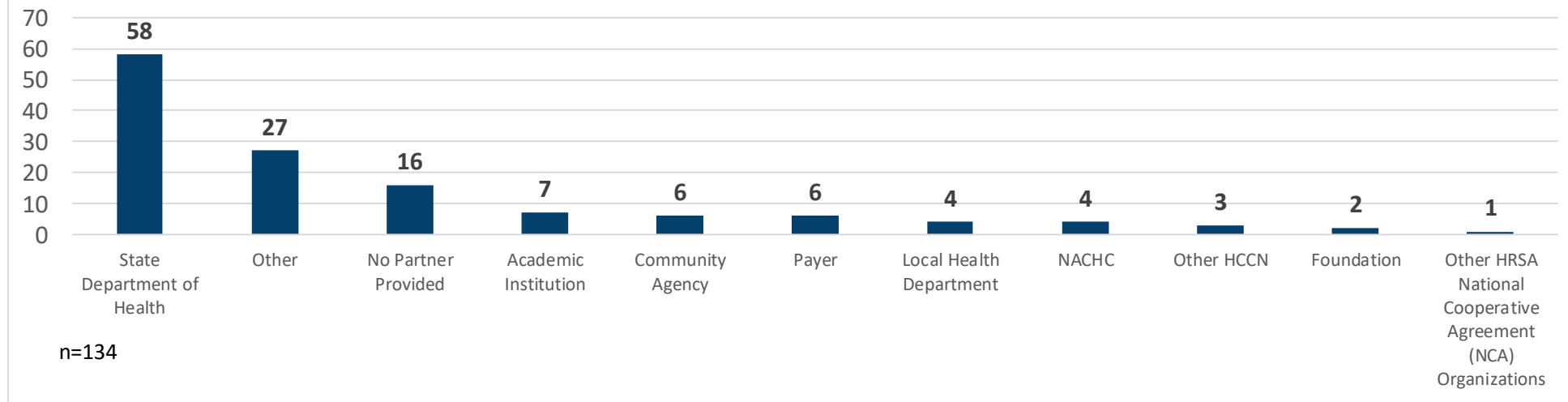
Figure 3: Number and Type of PCA/HCCN Diabetes Improvement Projects, Collaboratives, and Activities, 2019



Description of Current Diabetes Efforts

Thirty-six (36) of the 44 PCAs and HCCNs responding to the scan reported being engaged in more than 1 diabetes effort. The 43 PCAs/HCCNs engaged in diabetes efforts in 2019 (Figure 2) provided details on a total of 134 projects, collaboratives and other activities. Data included the focus of the improvement effort, primary partners, and primary funders. Figure 3 shows that the majority of diabetes efforts focus around clinical improvement while Figure 4 shows that state departments of health were the most frequently reported partners for these efforts.

Figure 4: Primary Partner of PCA/HCCN Diabetes Improvement Projects, Collaboratives, and Activities, 2019



2019-2020 PCA/HCCN DIABETES SCAN RESULTS

Figure 5: Primary Funders of PCA/HCCN Diabetes Improvement Projects, Collaboratives, and Activities, 2019

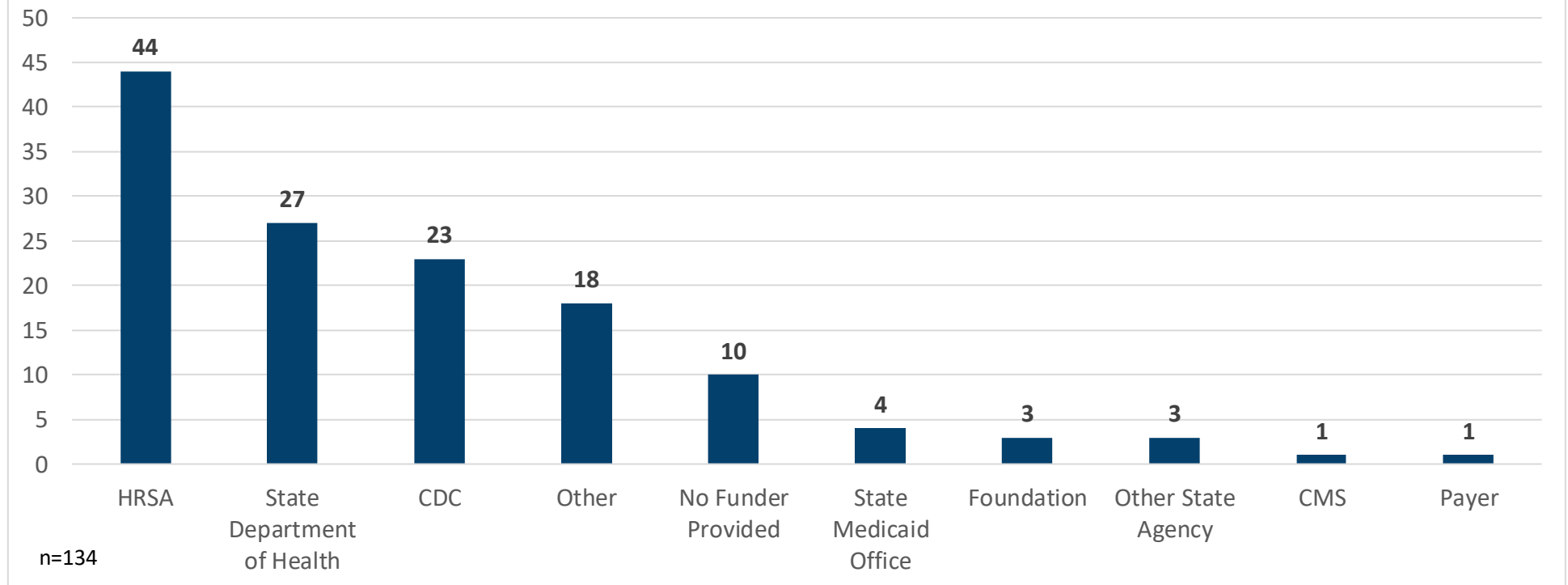
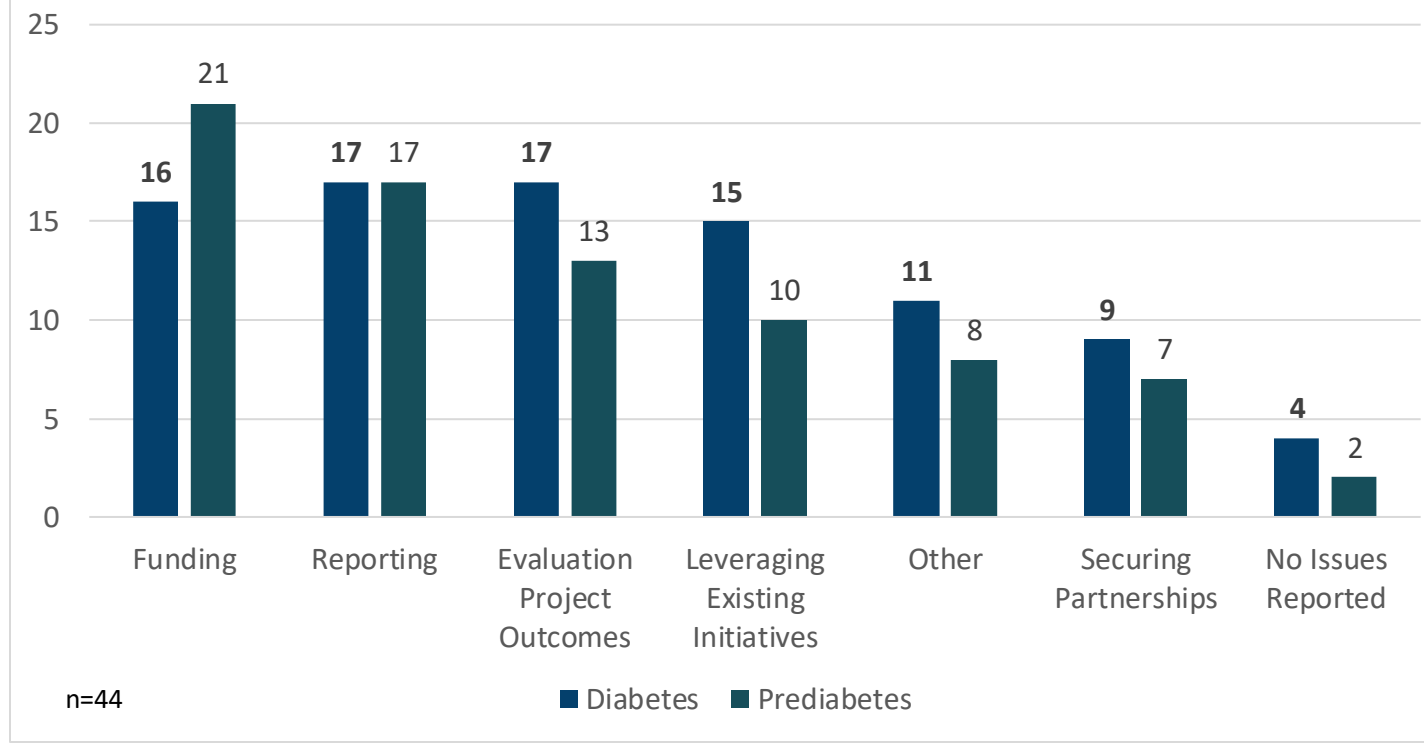


Figure 5 shows the primary funders of the 134 diabetes improvement efforts. The Health Resources Service Administration (HRSA), state departments of health, and the Centers for Disease Control and Prevention (CDC) were reported to be the 3 most common primary funders while Centers for Medicare and Medicaid Services (CMS) and payers were the primary funders on a total of only 1 project each.

Figure 6: Number of PCAs/HCCNs Experiencing Difficulties with Implementing Diabetes and Prediabetes Initiatives

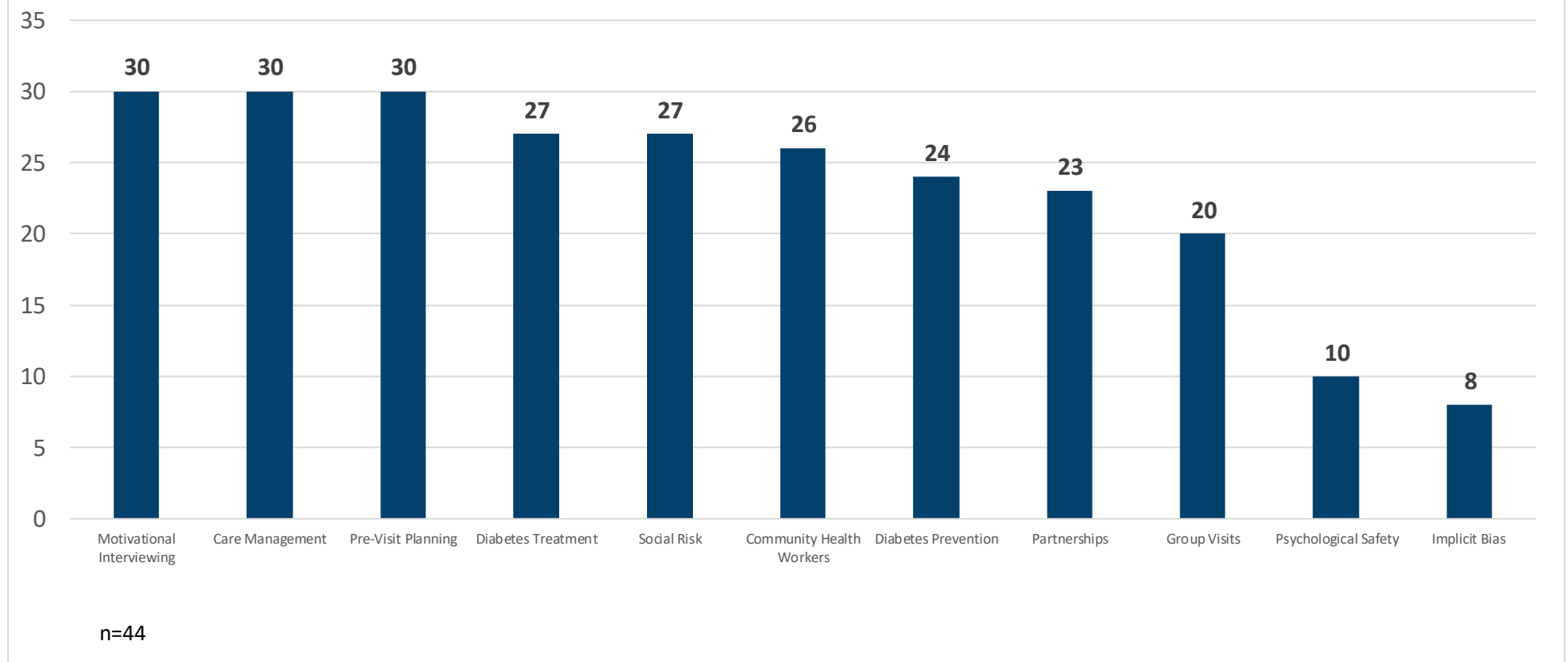


Implementation Barriers

The PCAs/HCCNs provided insight into difficulties they are experiencing implementing their diabetes and prediabetes initiatives. Figure 6 shows that funding and reporting were the two most-reported hurdles to diabetes efforts. Only 4 PCAs/HCCNs reported no issues with implementing diabetes initiatives while 2 experienced no issues implementing prediabetes initiatives.

2019-2020 PCA/HCCN DIABETES SCAN RESULTS

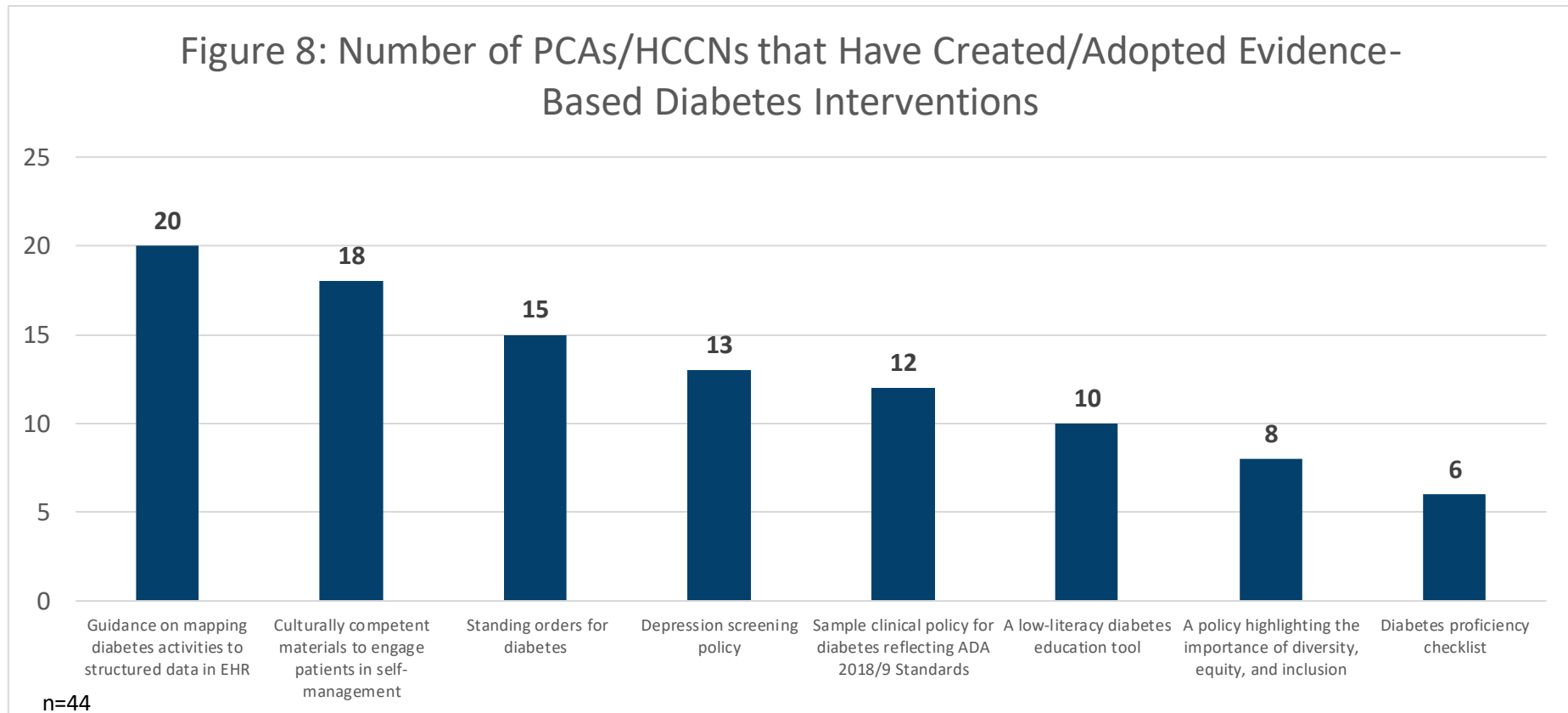
Figure 7: Number of PCAs/HCCNs that Have Created/Adopted an Evidence-Based Diabetes Training/Curriculum



Diabetes Change Package: Evidence-Based Trainings and Curricula

Thirty-nine PCAs/HCCNs reported that they have already implemented a number of evidence-based diabetes trainings, curricula, or other educational offerings. Figure 7 shows that 30 of these organizations provide educational opportunities around motivational interviewing, care management, and pre-visit planning while only 8 provide opportunities around reducing implicit bias and 10 around enhancing psychological safety.

2019-2020 PCA/HCCN DIABETES SCAN RESULTS

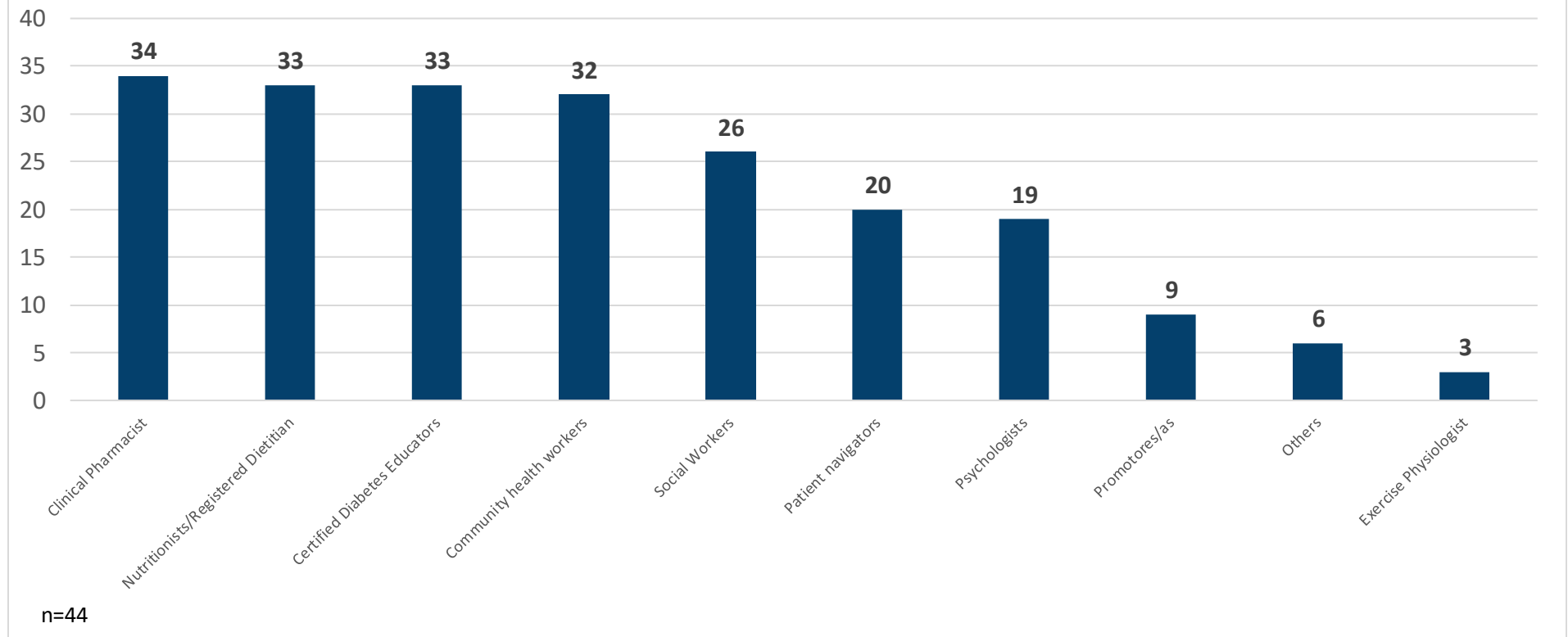


Diabetes Change Package: Evidence-Based Interventions

Thirty-three PCAs/HCCNs reported creating or adopting a number of evidence-based diabetes interventions. Figure 8 shows that (1) guidance on mapping diabetes activities to structured data in the electronic health record (EHR); (2) culturally competent materials to engage patients in self-management; and (3) standing orders for diabetes are the three most common interventions while a policy highlighting the importance of diversity, equity, and inclusion and a diabetes proficiency checklist were the least common.

2019-2020 PCA/HCCN DIABETES SCAN RESULTS

Figure 9: Number of PCAs/HCCNs with Member Health Centers Utilizing Ancillary Staff in Diabetes Improvement Efforts



Diabetes Change Package: Expanding the Care Team

PCAs/HCCNs were asked if their member health centers had model programs utilizing a number of ancillary staff to support their diabetes work. Figure 9 shows that clinical pharmacists, nutritionist/registered dietitian, and certified diabetes educators were the three types of staffing reported as most common while exercise physiologist and *promotores/as* were among the least common.