Diabetes Prevention Program Readiness Assessment For organizations considering an application to Centers for Disease Control and Prevention Diabetes Prevention Recognition Program

The Diabetes Prevention Program (DPP) is a one year intervention designed to help people with prediabetes avoid developing type 2 diabetes. The program is designed to assist participants achieve two primary goals:

- 1. Reduce and maintain individual weight loss by 5-7%.
- 2. Participate in regular physical activity (up to 150 minutes/ week)

Use this form to assess your organization's readiness to apply to the Centers for Disease Control and Prevention (CDC) Diabetes Prevention Recognition Program (DPRP) and offer a CDC recognized DPP in your organization.

Steps of the Assessment:

- 1. Assemble key staff, leadership, and community stakeholders.
- 2. For each statement below, read carefully and check the box if the statement if true of your organization's situation at this time.
- 3. Using the instructions at the bottom of the sheet, total your score.
- 4. Identify areas for improvement or capacity-building in order to increase readiness.
- 5. Once your organization scores a 25 or higher, you may access the National Diabetes Prevention Program website to begin the application process (<u>http://www.cdc.gov/diabetes/prevention/recognition/application.htm</u>). A completed CDC recognized lifestyle change program readiness assessment is highly recommended prior to the applying for "pending" CDC DPRP recognition.

Scoring the Assessment:

Level 3 [25 to 30 boxes]: Your organization has demonstrated most of the preparation needed to run a CDC recognized DPP. Your program stands a good chance of success! Please visit <u>https://nccd.cdc.gov/DDT_DPRP/ApplicationForm.aspx</u> to begin your CDC DPRP application.

Level 2 [19 to 24 boxes]: Your organization is on its way, but has some gaps in preparation before a CDC recognized DPP could be successful. Consider the items in the checklist that you did not check, set goals for how to achieve them, and plan to re-assess readiness after changes have been implemented.

Level 1 [18 or fewer boxes]: Your organization has significant work to do before beginning a CDC recognized DPP, and is likely not ready to apply to CDC DPRP at this time. Use the checklist to set goals and next steps for preparation.

If you have two or more boxes unchecked in any of the eight categories, focus on improving those areas before applying to the CDC Diabetes Prevention Recognition Program.**NOTE: CDC DPRP application MUST be completed prior to beginning Lifestyle Coach Training.**



Assessment: Is Our Organization Ready to Offer A CDC Recognized DPP? For each item below, check the box next to a statement if it is true of your organization <u>at this time</u>.

Category	Statements	Notes
A. Leadership and Goals	 1. Our organization agrees to comply with each of the CDC DPRP Standards and Operating Procedures. 2. Our organization's leadership support submission of the application for CDC DPRP recognition. 3. Other key leaders at the health department are supportive of and involved in the DPP. 4. We have defined our goals and what success means to us. 	Leadership support is crucial for DPP success. Consider who in the management team could be an asset or a barrier, and how you might improve these relationships, engage management in the development process, and address potential concerns of leaders. What do you consider success? It may be financial stability, serving all of the uninsured, improving specific health outcomes in the community or achieving patient satisfaction.
B. Staff	 5. We have identified a sufficient number of interested staff or community members who are qualified to facilitate a CDC recognized lifestyle change program (DPP). 6. We have the necessary administrative staff for a DPP. 7. We have a plan for training staff to collect and submit the required DPRP Evaluation Data Elements in the required format to the CDC DPRP every 12 months? 	Although the DPP instructional staff must hold appropriate credentials and receive continuing education. Remember that It is easy to underestimate the administrative support needed. Consider whether existing staff can take on these additional tasks. Could the health department hire more staff if needed?
C. Finances	 8. We have projected expenses for running a DPP, including administration, staff, rent/utilities, office supplies, program supplies, training, and travel. 9. We have a plan to sustain DPP without federal, state or local government grant funds long term. 10. We have researched sources of revenue, including health department funds, outside grants, and in-kind donations. 11. Based on our projections, we anticipate that revenue will equal or exceed expenses. 	Funding is often the biggest challenge in running a lifestyle change program because at this point the Diabetes Prevention Program is not massively reimbursable through Medicaid, Medicare or Private Insurance. Consider how long it may be before the program is self-sustaining, as well as length of grants and possibilities for other funding. What will happen if you have a budget shortfall? Approach existing CDC Recognized DPPs for estimates of expenses and ideas for funding.
D. Referrals and Recruitment	 12. Our organization currently receives referrals from local providers for weight management and healthy lifestyle education. 13. Our organization currently provides weight management and/or healthy lifestyle support programs. 14. We have contacted local health care providers to discuss the possibility of referring patients to participate in DPP. 15. We have a marketing/recruitment plan to attract participants to our DPP. 	Health care providers must be willing to refer patients to your DPP in order to maintain patient load and insurance reimbursement. Talk with physicians directly to understand what it would take for them to refer patients to your CDC recognized DPP.

E. Understanding the community and its needs	 at high risk for type 2 diabetes. 17. We have considered and described specific needs or considerations for serving our target audience 18. We have knowledge of all existing local lifestyle change programs, and can demonstrate a need for additional lifestyle 	Consider which segments of your community are most affected unhealthy lifestyles, as well as where the greatest potential for impact lies. What needs are not being met for lifestyle change in your community? What will you do differently to meet these needs? How will you address patient barriers such as limited time and/or transportation?
F. Engagement with target audience	 our target audience, including solicitation of how to serve their needs 20. Our organization has active and positive relationships with our 	Take the time—before applying to DPRP—to understand the needs of and potential barriers for these individuals, particularly why they are not receiving lifestyle change programs now. Focus groups and community organizations can be great resources.
G. External Partnerships	 health-focused organizations in our community 22. Our organization has strong relationships with one or more healthcare providers in our community 23. Our organization has strong relationships with other relevant partners such as local government, media outlets, or cooperative extension 24. Our organization has strong relationships with community support services to which we may need to refer DPP participants 	Partnerships are crucial for sustainability and providing complete care. Consider what you would do if a participant needed other support services, such as financial or mental. If your relationships with these other organizations are not strong and positive, reach out to them to build awareness and teamwork in serving your community. Note: "strong relationships" may include collaboration on projects or events; frequent or formal patient referral; and/or contracts and memorandums of understanding between the organizations.
H. Implementation and Sustainability	 and implement DPP within 3 months of Lifestyle Coach Training (REQUIRED) 26. Our identified program staff and administration have program implementation experience and/or expertise 	Who in your team has experience providing lifestyle change education, using data collection systems, collecting data, and performing quality improvement (QI)? Look for available resources to increase your capacity, through education, training, and additional staff.

Count the number of boxes that you checked, and refer to page one for scoring.