

Utah Community Health Program Guide



Linking Utahns to Quality
Self-Management Education





Revised on 6/7/2017



Acknowledgements

This document was developed based on the Montana Chronic Disease Prevention & Health Promotion Bureau Community Health Program Guide.

www.dphhs.mt.gov/publichealth/chronicdisease/CommunityBasedProvgrams

We would like to thank the following programs for their assistance in developing this document:

- Montana Chronic Disease Prevention & Health Promotion Bureau

Utah Department of Health

- Alzheimer's and Related Dementias Program
- Arthritis Program
- Asthma Program
- Cancer Control Program
- Healthy Living Through Environment, Policy & Improved Clinical Care (EPICC) Program
- Tobacco Prevention and Control Program
- Violence and Injury Prevention Program



Utah Healthy Community Program Guide

Public health enhances the quality of life in Utah by supporting healthy living in your community. It touches everyone in your community – from the minute you're born, throughout your entire life. Take a closer look at what public health programs are available in your community to make your life better.

Purpose of the guide

This guide highlights programs that address the prevention and management of chronic diseases and health disparities experienced by Utahns. These programs offer access to health promotion and healthy lifestyle opportunities.

Goal of community health programs

These programs aim to reduce and prevent illness and death through healthy lifestyles and self-management.

How to use the guide

The table on pages 4 and 5 lists the community health programs and briefly provides:

- Program description
- Time commitment of participant
- Target audience
- Website for more Information

Fact sheets on each program are provided for more detail on:

- Program description
- Program benefits
- What is provided for participants
- Resources & contact information
- Why to make a referral

Community-Based Programs



UTAH DEPARTMENT OF
HEALTH
www.livingwell.utah.gov

Program	Description	Time Commitment of Participants	Target Audience	Website	Pg.
Alzheimer's and Related Dementias	Educational resources available for patients, caregivers, and health care professionals. 24-hour helpline is available at 1-800-272-3900.		Adults diagnosed with Alzheimer's or related dementias	www.alz.org/utah	7
Arthritis Foundation Exercise Program	A recreational exercise program for adults with arthritis. Includes health education, exercise for any fitness level, and relaxation techniques.	1 hour class 2-3 times per week	Adults with arthritis or anyone wanting to establish an exercise routine	www.livingwell.utah.gov	8
Asthma Home Visiting Program	A program that provides 3 in-home visits. During these visits, participants will learn more about how to manage asthma and reduce asthma triggers in the home.	3 home visits over a period of about 4 months. Each visit is between 60-90 mins.	Individuals with asthma living in Salt Lake and Utah Counties.	www.health.utah.gov/asthma	9
BeWise Program	A program that offers cardiovascular screening and health coaching. Provides educational resources and support tools to assist women in setting and achieving health goals.	Annual screening and 3-5 health coaching sessions over a year	Women aged 40-64 who live at or below 250% of the Federal Poverty Level	www.cancerutah.org/bewise	10
Breast & Cervical Cancer Screening	A program that provides breast and cervical cancer screening to women.	Annual screening, follow-up, and diagnostic services when clinically indicated	Women aged 40-64 who live at or below 250% of the Federal Poverty Level	www.cancerutah.org	11
Car Seat Education Classes	Educate parents and care givers of children how to choose and install car seats from infant to seatbelt.	1-2 hours	Parents and caregivers of children 12 and younger	www.safekidsutah.org	12
Dementia Dialogues	Dementia Dialogues is an interactive educational program designed for individuals, groups and organizations that interact and/or care for people diagnosed with dementia.	5 sessions; 8 hours for the entire training	Adults	www.livingwell.utah.gov	13
Diabetes Self-Management Education (DSME/T)	Connects people with diabetes to quality diabetes education to enhance self-management and improve quality of life.	Individually tailored to each person's needs (e.g. up to 10 hours in year one, then 2 hours the following year)	People diagnosed with diabetes	www.choosehealth.utah.gov	14
EnhanceFitness	Helps adults with arthritis and other chronic conditions adopt and maintain an exercise routine in order to improve mobility and decrease pain. All exercises can be done sitting or standing.	1 hour class 2-3 times per week	Adults who want to establish an exercise routine, especially those with chronic diseases	www.livingwell.utah.gov	15

Community-Based Programs (continued)

Program	Description	Time Commitment of Participants	Target Audience	Website	Pg.
Living Well with Chronic Conditions (CDSMP)	Empowers adults with one or more chronic conditions learn how to take control of their own health, learning techniques like exercise, diet, communicating effectively with health care providers, and stress management.	2.5 hours per week for 6 weeks	Adults with 1 or more chronic conditions and their family members or caretakers	www.livingwell.utah.gov	16
Living Well with Chronic Pain (CPSMP)	The Chronic Pain Self-Management Program (CPSMP) is a 6-session evidence-based workshop designed for those dealing with chronic pain.	2.5 hours per week for 6 weeks	Adults who are experiencing chronic pain	www.livingwell.utah.gov	17
Living Well with Diabetes (DSMP)	Empowers adults with diabetes to learn how to take control of their own health through self-management techniques with a focus on diabetes specific health concerns.	2.5 hours per week for 6 weeks	Utah adults with diabetes and their family members or caretakers	www.livingwell.utah.gov	18
National Diabetes Prevention Program (National DPP)	A program that offers comprehensive group-based education on healthy diet and exercise to help adults at high-risk for Type 2 Diabetes to adopt healthy lifestyles.	1 hour per week for 16 weeks; 1 hour per month for 6 months	Adults who are overweight and have risk factors for Type 2 Diabetes	www.livingwell.utah.gov	19
Stepping On	A fall prevention program that addresses medication, visual impairments, strength, balance, and the home environment.	2 hours per week for 7 weeks + a 1-hour reunion class	Adults aged 60+ who are at risk for falling, have recently fallen, or have a fear of falling.	www.health.utah.gov/vipp/older-adults/falls	20
Suicide Prevention Training	Evidence based education for community members and professionals available at no cost, designed to increase participants' abilities to recognize someone at risk for suicide.	1.5-8 hours	Families and social supports of those at risk of suicide or experiencing a mental health condition	www.health.utah.gov/vipp	21
Traumatic Brain Injury (TBI) Fund	Education to community and professionals about Traumatic Brain Injury (TBI). Provides resource facilitation to individuals with TBI and their families.		Adults and Children who have sustained a TBI and their families.	www.health.utah.gov/tbi	22
Utah Tobacco Quit Line	Telephone line that helps tobacco users to quit.	5 personalized telephone coaching sessions	Tobacco users, or anyone who is trying to help someone quit	www.waytoquit.org	23
Walk With Ease	Teaches participants how to safely start and maintain a regular walking routine to decrease pain and increase overall mobility.	1 hour class	People diagnosed with diabetes	www.livingwell.utah.gov	24

Alzheimer's and Related Dementias Program



WHY MAKE A REFERRAL?

- Researchers believe that early detection will be key to preventing, slowing, and stopping Alzheimer's disease.
- Active management of Alzheimer's and other dementias can improve quality of life through all stages of the disease for individuals with dementia and their caregivers.
- 75% of adults report not being knowledgeable about the disease¹.
- Only 19% of people aged 60 and older who reported worsening confusion or memory loss have discussed their symptoms with a healthcare provider².

INFORMATION

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PROGRAM DESCRIPTION

The Alzheimer's and Related Dementias Program provides educational resources for patients, caregivers, and health care professionals. The agencies listed below offer a variety of classes for patients, families, caregivers, and health care professionals.

PROGRAM BENEFITS

- Increases knowledge and awareness of signs and symptoms of Alzheimer's and related dementias.
- Resources, home care, support groups, education, and events for caregivers.
- Improves the dignity and quality of life for people with dementia and their families.

RESOURCES & PROGRAMS

- Alzheimer's Association toll-free Helpline 1-800-272-3900 or www.alz.org/utah
- National Institute on Aging-Alzheimer's Disease Education and Referral Center www.nia.gov/Alzheimers
- Local Area Agencies on Aging are charged with the responsibility of providing a comprehensive array of services to, and advocating for, the needs of seniors residing in their areas. www.hsdaas.utah.gov
- Caregiver Support Program assists caregivers with information and assistance, free classes, conferences and events, support groups, consultations, and limited respite services. Call 385-468-3280 for more information.
- For a list of support groups visit www.alz.org/crf, choose Alzheimer's Association Programs and Events, click on Support Groups, and search by your location. Or call 800.272.3900. You will find both caregiver support groups as well as groups for those in the early stage of Alzheimer's, dementia, or Mild Cognitive Impairment.
- The Alzheimer's Association provides in-person workshops and online programs to help caregivers gain knowledge about the disease process and caregiving techniques. For a list of available programs visit www.alz.org/utah and click on Education or call 800.272.3900.
- The Alzheimer's Association TrialMatch is a free, easy-to-use clinical studies matching service that connects individuals with Alzheimer's, caregivers, healthy volunteers and physicians with current studies.
www.alz.org/research/clinical_trials/find_clinical_trials_trialmatch.asp

FOR MORE INFORMATION ON THIS PROGRAM

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SOURCES

1. 2016 Alzheimer's Disease Facts and Figures
2. The Healthy Brain Initiative, 2013-2018

Arthritis Foundation Exercise Program



WHY MAKE A REFERRAL?

- 1 in 5 Utah adults (410,000) report having been diagnosed with Arthritis¹.
- 46.7% of adults with arthritis report being limited in their usual activities, work, or social activities¹.
- 23.3% of adults with arthritis report engaging in no physical activity¹.
- 48.5% of adults with arthritis report too little physical activity to meet national recommendations².

PROGRAM DESCRIPTION

The Arthritis Foundation Exercise Program is a community-based recreational program specifically designed to teach adults with arthritis how to exercise safely. Trained instructors cover a variety of range-of-motion exercises, endurance-building activities, relaxation techniques, and health education topics. All of the exercises can be modified to meet participant needs and abilities.

PROGRAM BENEFITS

Participants completing the program report experiencing:

- Improved functional ability
- Decreased depression
- Decreased pain
- Increased confidence in one's ability to exercise

WHAT IS PROVIDED TO PARTICIPANTS

Classes meet two or three times per week for an hour. One session is typically 8 weeks long, but many locations offer ongoing classes and participants can continue attending as long as they wish. Each class offers:

- Range of motion exercises and stretches
- Endurance exercises
- Strength building exercises
- Health education
- Relaxation techniques
- Social interaction

RESOURCES

Visit www.livingwell.utah.gov for more information

FOR MORE INFORMATION ON THIS PROGRAM

livingwell@utah.gov

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SOURCES

1. 2014 Utah Behavior Risk Factor Surveillance System (BRFSS) Report
2. 2013 Utah BRFSS Report

Asthma Home Visiting Program



WHY MAKE A REFERRAL?

- About 64% of those with asthma in Utah reported at least one trigger in their home¹.
- About 36% of those who reported 3 or more triggers in their home also reported missing at least one school day in the past year due to asthma¹.
- The asthma-related emergency department rate in Utah (2013) was 23.3 per 10,000 encounters².

PROGRAM DESCRIPTION

This program is offered only in Salt Lake and Utah Counties. In this free program, two health educators from Salt Lake or Utah County Health Department will come to the participant's home for 3 in-home visits lasting between 60-90 minutes. Participants will also receive two follow up calls 6 and 12 months after completing the program. Priority is given to those that have severe or uncontrolled asthma.

PROGRAM BENEFITS

Each in-home visit provides asthma education specific to you and your home.

- Visit one: Participants will learn more about how to manage asthma. Topics include: asthma symptoms, triggers, medications, inhaler technique, and asthma action plans. Participants will make a plan to improve asthma control.
- Visit two: Participants will walk through the home to identify asthma triggers, then make a plan to reduce these triggers.
- Visit three: Participants will review progress on controlling their asthma and reducing triggers.

WHAT IS PROVIDED TO PARTICIPANTS

- One-on-one asthma self-management education.
- An in-home assessment to help reduce asthma triggers.
- Eligible participants may be referred to local housing agencies for assistance with remediating asthma issues in the home.
- Participants may also receive a pillow and/or mattress cover to reduce dust mite exposure.

RESOURCES

Visit www.health.utah.gov/asthma for more information.

FOR MORE INFORMATION ON THIS PROGRAM

asthma@utah.gov

INFORMATION

www.livingwell.utah.gov

livingwell@utah.gov

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SOURCES

1. Utah BRFSS Asthma Call-back Survey, 2009-2014 combined
2. Utah Emergency Department Encounter Database, 2013. Age-adjusted rate

WHY MAKE A REFERRAL?

- Cardiovascular disease is the leading cause of death of women in the United States¹.
- Risk Factors for heart disease include diabetes, overweight and obesity, poor diet, and physical inactivity¹. All of which are targeted through the BeWise Program.
- 60.5% of Utah adults are overweight or obese².
- People in Utah with low household income and fewer years of formal education report higher rates of tobacco use than the general population².

PROGRAM DESCRIPTION

The BeWise Program provides free cardiovascular risk screening to low income, underinsured, or uninsured women aged 40-64. The program also includes health coaching and is specifically designed to help women set and reach their health goals through free education and resources. Trained educators cover a variety of health topics, including exercises, diet, smoking cessation, and support options. All of the education is tailored to meet the participant's needs and abilities.

PROGRAM BENEFITS

Participants completing the program report experiencing:

- Healthier eating
- Increased exercise
- Increased motivation to live a healthier lifestyle
- Improved blood pressure values
- Weight loss
- Reduced total cholesterol values

WHAT IS PROVIDED TO PARTICIPANTS

Cardiovascular screenings include:

- Weight
- Height
- Body Mass Index
- Blood Pressure
- Cholesterol
- Glucose (blood sugar) or A1C

Health coaching

- An opportunity to speak one-on-one with a health coach
- Tools and resources to support health goals participants set

RESOURCES

Visit www.cancerutah.org/bewise for more information.

FOR MORE INFORMATION ON THIS PROGRAM

Resource Hotline
1-800-717-1811

INFORMATION

www.livingwell.utah.gov

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SOURCES

1. www.cdc.gov/dhdsp/data_statistics/fact_sheets/fs_heart_disease.htm
2. 2014 Utah BRFSS Report

Breast & Cervical Cancer Screening



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WHY MAKE A REFERRAL?

- 1 in 8 women in the United States will be diagnosed with breast cancer; that's one every 2 minutes¹.
- Breast cancer is the leading cause of cancer death among Utah women².
- Clinical trials and observational studies show that routine screening with mammography can reduce breast cancer mortality by about 20% for women of average risk³.

PROGRAM DESCRIPTION

The Utah Cancer Control Program provides breast and cervical cancer screening exams to underserved women who are 40-64 years of age, have low incomes, or are a member of an underserved population. These cancer screenings and education are provided to women throughout the state through local health districts and other health care providers.

PROGRAM BENEFITS

Women participating in this program benefit by:

- Receiving early detection and treatment if a cancer is found, which improves survival rates
- Reduced costs for cancer treatment when cancer is found earlier

WHAT IS PROVIDED TO PARTICIPANTS

- Pap test (if necessary)
- Pelvic exam
- Clinical breast exam
- Mammogram
- Health education

RESOURCES

Visit www.cancerutah.org for more information.

FOR MORE INFORMATION ON THIS PROGRAM

Call the Resource Hotline
1-800-717-1811

INFORMATION

www.livingwell.utah.gov

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SOURCES

1. Breast Cancer Research Foundation
2. 2012 IBIS Data
3. Benefits and Harms of Breast Cancer Screening. Journal of the American Medical Association October 20, 2015, Vol 314, No.15
4. National Cancer Institute, www.cancer.gov

Car Seat Education Classes



WHY MAKE A REFERRAL?

Preventable injuries are the number one cause of childhood death with motor vehicle accidents topping the list for children. We know that 3 out of 4 car seats are improperly installed, we can change this. Proper car seat use saves lives; unfortunately car seats can be complicated. Child Passenger Safety Technicians are trained to teach parents and care givers how to properly install their car seats and give them personal instruction on their specific car seat. Even if caregivers have installed seats for years they will walk away knowing something (more than likely many things) that they did not know before.

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PROGRAM DESCRIPTION

Utah Local Health Departments provide education to parents and caregivers of children 12 and younger how to properly choose and install car seats and seat belts. They talk about the different stages of car seats from rear facing, forward facing, booster and seatbelt. Education may be done through a class, an individual appointment or a community checkpoint event.

PROGRAM BENEFITS

Participants completing the program report experiencing:

- Increased ability to properly install their car seats
- Come away knowing Utah's laws regarding child safety seats and seatbelts
- Know to importance of properly installed car seats and correct harnessing
- Understand the importance of booster seats
- Understand the importance of seat belts

WHAT IS PROVIDED TO PARTICIPANTS

- Educational information to take home
- Some Health Departments offer low-cost car seats

RESOURCES

Visit this website for more information:

- www.safekids.org
- www.safekidsutah.org

CONTACT PERSON

Cambree Applegate
capplegate@utah.gov
(801) 538-6852

SOURCES

1. www.cdc.gov/dhdsp/data_statistics/fact_sheets/fs_heart_disease.htm
2. 2014 Utah BRFSS Report

WHY MAKE A REFERRAL?

- Research shows that patients are more likely to engage in preventive health behaviors when their health care professional recommends them.
- Referring patients to an evidence-based lifestyle change program is smart practice.

PROGRAM DESCRIPTION

Dementia Dialogues is a 5-session training course designed to educate individuals who care for persons who exhibit signs and symptoms associated with Alzheimer's disease or related dementias. Over 21,000 individuals have been trained in at least one session and over 10,000 individuals have completed the course. Each session is approximately one and one half hours in length.

RECOMMENDED PARTICIPANTS

- Caregivers
- Social Workers
- Certified Nursing Assistants
- Personal Care Assistants
- Public Health Professionals
- Counselors
- Nurses
- Medical Professionals
- Clergy
- Families
- Activity Directors
- Anyone who is interested, or interacts or cares for those diagnosed with Dementia.

PROGRAM BENEFITS

- Session 1: Introduction to Dementia
- Session 2: Creating Dialogue and Keeping It Going
- Session 3: It's a Different World: The Environment and Quality of Life
- Session 4: It's Nothing Personal: Addressing Challenging Behaviors
- Session 5: Now What Do We Do? Creative Problem Solving

When all 5 sessions are completed participants are eligible for certification in the program. Each session is ideally presented in a 2 hour block of time, or one 8 hour day. The sessions may be split weekly. A total of 7.5 continuing education hours are also available upon completion of the Dementia Dialogues series. Each session is worth approximately 1.5 continuing education credit hours.

COST/FEES

This training is provided at no cost to participants through the Arnold School of Public Health at the University of South Carolina, and the Utah Department of Health.

RESOURCES

Visit www.livingwell.utah.gov for more information.

FOR MORE INFORMATION ON THIS PROGRAM

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UNIVERSITY OF
SOUTH CAROLINA
Arnold School of Public Health

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SOURCES

1. Updated soon.

Diabetes Self-Management Education



WHY MAKE A REFERRAL?

- In Utah, 7.1% of adults, including 12.0% of American Indians, reported being diagnosed with diabetes in 2014¹.
- Diabetes self-management education results in improved A1C, blood pressure, and cholesterol levels as well as fewer complications and reduced rates of hospitalizations².
- Diabetes can be one of the most challenging health conditions to treat.
- Diabetes is costly. One out of every five health care dollars is spent on diabetes health care³.
- Diabetes education reduces the risk of hospitalization for diabetes complications².

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PROGRAM DESCRIPTION

Diabetes education is a collaborative process that helps people with diabetes learn how to successfully manage their disease. The goal of diabetes education is to help people with diabetes practice self-care behaviors every day and be as healthy as possible. Diabetes self-management education/training is provided by diabetes educators.

PROGRAM BENEFITS

- Real-life guidance and coaching to help people understand exactly how to best manage their diabetes, and to feel supported while doing it.
- It focuses on seven self-care behaviors so that people with diabetes can be healthy and fully enjoy life:
 - » Healthy eating
 - » Being active
 - » Monitoring blood sugar levels
 - » Taking medication
 - » Problem solving
 - » Healthy coping skills
 - » Reducing risks

WHAT IS PROVIDED TO PARTICIPANTS

- Education and support on all aspects of diabetes care by diabetes educators in individual or group settings.
- Individualized plan that includes the tools and support to help make the plan easy to follow.

RESOURCES

Visit www.choosehealth.utah.gov for more information.

FOR MORE INFORMATION ON THIS PROGRAM

livingwell@utah.gov

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SOURCES

1. Utah BRFSS 2014
2. Robbins JM, Thatcher GE, Webb DA, Valdmanis VG. Nutritionist visits, diabetes classes, and hospitalization rates and charges: the Urban Diabetes Study. *Diabetes Care*. 2008;31(4):655-60
3. The American Diabetes Association. The Cost of Diabetes. www.diabetes.org/advocacy/news-events/cost-of-diabetes.html

WHY MAKE A REFERRAL?

- 1 in 5 Utah adults (410,000) report having been diagnosed with Arthritis¹.
- 46.7% of adults with arthritis report being limited in their usual activities, work, or social activities¹.
- 23.3% of adults with arthritis report engaging in no physical activity¹.
- 48.5% of adults with arthritis report too little physical activity to meet national recommendations².

PROGRAM DESCRIPTION

EnhanceFitness focuses on dynamic cardiovascular exercise, strength training, balance, and flexibility — everything older adults need to maintain health and function as they age. Led by a certified instructor, classes are held three times a week in community settings and are a great workout. Each class may include up to 25 participants and participants may either be amongst peers of their own level of fitness or a group of various fitness levels from the frail to the more fit older adult.

PROGRAM BENEFITS

Participants completing the program report experiencing:

- Increased strength
- Greater activity levels
- Decreased depression
- Improved social function

WHAT IS PROVIDED TO PARTICIPANTS

Classes meet three times per week for an hour. Each class offers:

- 5-minute warm-up
- 20-minute aerobics workout that gets participants moving, or a walking workout to lively music
- 5-minute cool-down
- 20-minute strength training workout with soft ankle and wrist weights (0 up to 20 pounds)
- 10-minute stretching workout
- Balance exercises throughout the class
- Social interaction

RESOURCES

Visit www.livingwell.utah.gov for more information.

FOR MORE INFORMATION ON THIS PROGRAM

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INFORMATION

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SOURCES

1. 2014 Utah BRFSS Report
2. 2013 Utah BRFSS Report

WHY MAKE A REFERRAL?

- Seven of the top ten causes of death in the US are caused by chronic disease¹.
- 17% of Utah adults report having two or more chronic conditions².
- In 2009, the healthcare costs associated with chronic disease exceeded \$586 million³.

PROGRAM DESCRIPTION

Living Well with Chronic Conditions (CDSMP; Chronic Disease Self-Management Program) is a program for people with chronic health problems. The workshops empowers participants to take an active role in managing their health by giving them the key skills needed to manage any chronic health condition. The program addresses common symptoms and worries from all types of chronic disease and illnesses. Family members and others who support people with a chronic health condition are also encouraged to attend.

PROGRAM BENEFITS

Participants who have completed a workshop demonstrate:

- Increased exercise
- Increased ability to do social and household activities
- Less depression, fear, frustration, and worry about their health
- Reduction in symptoms like pain
- Increased confidence in their ability to manage their condition
- Decreased emergency department visits and hospitalizations

WHAT IS PROVIDED TO PARTICIPANTS

Workshops are facilitated by two trained instructors and meet once a week for six weeks; each class lasts 2 ½ hours. The workshop covers the following topics:

- Pain and fatigue management
- How to make an action plan to set and achieve attainable goals
- Problem solving
- How to deal with difficult emotions
- Physical activity and exercise
- How to make decisions
- Healthy eating
- Communication skills
- Working with your health care professional

RESOURCES

Visit www.livingwell.utah.gov for more information.

FOR MORE INFORMATION ON THIS PROGRAM

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INFORMATION

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SOURCES

1. Centers for Disease Control and Prevention. Death and Mortality. NCHS FastStats Web site. <http://www.cdc.gov/nchs/faststats/deaths.htm>
2. Utah BRFSS 2014
3. Utah All Payer Claims Database, 2010

WHY MAKE A REFERRAL?

- Examples of chronic pain conditions are: chronic musculo-skeletal pain (such as neck, shoulder, back pain, etc.), fibromyalgia, whiplash injuries, chronic regional pain syndromes, repetitive strain injury, chronic pelvic pain, post-surgical pain that lasts beyond 6 months, neuropathic pain (often caused by trauma), or neuralgias (such as post-herpetic pain, and trigeminal neuralgia), and post stroke or central pain.
- The CPSMP may also benefit those who have conditions such as persistent headache, Crohn's disease, irritable bowel syndrome, diabetic neuropathy, or those who experience severe muscular pain due to conditions such as multiple sclerosis.

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PROGRAM DESCRIPTION

The Chronic Pain Self-Management Program (CPSMP) is a 6-session evidence-based workshop designed for those dealing with chronic pain. Participants learn self-management techniques and skills needed in the day to day management of their chronic pain condition. This program has also been proven effective with family and caregivers. This program also aims to help participants better communicate with their health care providers and make healthy day-to-day decisions.

Program Benefits

Participants who have completed a workshop demonstrate:

- Increased exercise
- Increased ability to do social and household activities
- Less depression, fear, frustration, and worry about their pain
- Reduction in pain
- Increased confidence in their ability to manage their pain
- Decreased emergency department visits and hospitalizations

What is provided to Participants

Workshops are facilitated by two trained instructors and meet once a week for six weeks; each class lasts 2 ½ hours. The workshop covers the following topics:

- Pain and fatigue management
- How to make an action plan to set and achieve attainable goals
- Problem solving
- How to deal with difficult emotions
- Appropriate physical activity for maintaining and improving strength, flexibility, and endurance
- Effective decision making
- Healthy eating
- Communication skills
- Pacing activity and rest
- Working with your health care professional

Resources:

Visit www.patienteducation.stanford.edu/programs/cpsmp.html for more information

For More Information on this Program

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SOURCES

1. Andersen, L. N., Kohberg, M., Herborg, L. G. Sogaard, K., & Roessler, K. K. (2014). "Here we're all in the same boat" – a qualitative study of group based rehabilitation for sick-listed citizens with chronic pain. *Scandinavian Journal of Psychology*, 55, 333-342.
2. Andersen, L. N., Juul-Kristensen, B., Roessler, K. K., Herborg, L. G. Sorensen, T. L., & Sogaard, K., (2013). Efficiency of 'Tailored Physical Activity' or 'Chronic Pain Self-Management Program' on return to work for sick-listed individuals: design of a randomised controlled trial. *BMC Public Health*, 13: 66. (pgs. 1-8).

WHY MAKE A REFERRAL?

- In Utah, 7.1% of adults, including 12.0% of American Indians, reported being diagnosed with diabetes in 2014¹.
- DSMP has been shown to improve hypoglycemia, depression, diet, communication, and self efficacy².

PROGRAM DESCRIPTION

Living Well with Diabetes (CDSMP) teaches participants skills to manage their diabetes and other chronic conditions. In addition to addressing the physical and emotional symptoms of diabetes, this program also aims to help participants better communicate with their health care providers and make healthy day-to-day decisions. The workshop is goal-orientated and shown to improved health outcomes for people looking to better manage their diabetes.

PROGRAM BENEFITS

Participants who have completed a workshop demonstrate:

- Increased exercise
- Increased ability to do social and household activities
- Less depression, fear, frustration, and worry about their health
- Reduction in symptoms like pain
- Increased confidence in their ability to manage their condition
- Decreased emergency department visits and hospitalizations
- Increased knowledge for dealing with diabetes specific symptoms

WHAT IS PROVIDED TO PARTICIPANTS

Workshops are facilitated by two trained instructors and meet once a week for six weeks; each class lasts 2 ½ hours. During the workshop the topics covered include:

- Pain, fatigue, and stress management
- Monitoring blood sugar and managing hyper/hypoglycemia
- How to make an action plan to set and achieve attainable goals
- Problem solving
- How to deal with difficult emotions and complications
- Physical activity and exercise
- Healthy eating
- Communication skills and working with your health care professional
- Foot care

RESOURCES

Visit www.livingwell.utah.gov for more information.

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SOURCES

1. Utah BRFSS 2014
2. Lorig K, Ritter PL, Villa FJ, Armas J. Community-based peer-led diabetes self-management: A randomized trial. The Diabetes Educator 2009 July-August;35(4):641-51

National Diabetes Prevention Program



WHY MAKE A REFERRAL?

- It is estimated that 35% of adults are at high risk for developing type 2 diabetes¹.
- Type 2 diabetes can be prevented or delayed by lifestyle changes.
- The Diabetes Prevention Program has been shown to reduce the incidence of type 2 diabetes by 58%, and this risk reduction is sustained over time².

PROGRAM DESCRIPTION

Eighty-six million Americans now have prediabetes—that's 1 out of 3 adults! Of those 86 million, 9 out of 10 of them don't even know they have it. Without intervention, 15% to 30% of people with prediabetes will develop type 2 diabetes within 5 years¹. With numbers like that, it's important to learn about prediabetes and take action.

The National Diabetes Prevention Program (National DPP) is an evidence-based lifestyle change program with the goal to prevent or delay the development of type 2 diabetes and heart disease among at-risk Utahns.

PROGRAM BENEFITS

- Empowerment through education and application
- Movement toward a healthier self, one step at a time
- Sustainability through behavior change
- Increased physical activity
- Weight loss

WHAT IS PROVIDED TO PARTICIPANTS

This is a 12-month intensive lifestyle change program with 16 weekly and 6 monthly group sessions focusing on:

- Behavior change
- Healthy eating strategies
- Ways to become more physically active
- Getting 150 minutes of physical activity per week
- Achieving a 5-7% weight loss

The sessions are facilitated by trained lifestyle coaches that encourage, coach, and motivate participants to adopt sustainable lifestyle changes.

RESOURCES

Visit www.livingwell.utah.gov for more information.

FOR MORE INFORMATION ON THIS PROGRAM

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INFORMATION

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SOURCES

1. Centers for Disease Control and Prevention. National Diabetes Statistics Report, 2014. www.cdc.gov/diabetes/prevention/prediabetes-type2/
2. Knowler WC, Barrett-Conner E, Fowler SE, et al.; Diabetes Prevention Program Research Group. Reduction in the incidence of type 2 diabetes with lifestyle intervention or metformin. *N Engl J Med* 2002;346:393–403. www.nejm.org/doi/full/10.1056/NEJMoa012512#1=articleTop

WHY MAKE A REFERRAL?

- Falls pose a major threat to the health and independence of aging adults.
- Falls are the leading cause of fatal and nonfatal injury for older adults¹.
- The combined direct costs of fall-related hospitalizations and emergency department visits in Utah are \$123 million annually².
- Evidence-based programs, such as Stepping On, can prevent falls by addressing risk factors, such as muscle weakness, balance deficits, vision impairment, and home safety^{3,4}.

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PROGRAM DESCRIPTION

Stepping On is an evidence-based fall prevention program that reduces falls among participants. Falling is not an inevitable result of aging. Through practical lifestyle changes and community partnerships, we can substantially reduce fall risks, keeping older adults living independently with a good quality of life. Stepping On addresses known risk factors and promotes behavior change. Professional guest experts include a pharmacist, optometrist, physical therapist, and community safety officer.

Eligible Participants:

- Are age 60 years or over
- Are at risk for falling, have fallen in the past year, or are fearful of falling
- Are living in a home or apartment
- Are not suffering from dementia

PROGRAM BENEFITS

- 31% reduction in falls among participants⁴
- Decreased fear of falling
- Increased performance of safe behaviors

WHAT IS PROVIDED TO PARTICIPANTS

Classes meet once a week for two hours. One session is 7 weeks long. Classes include interactive discussion and storytelling to promote adult learning. Education topics include: falls and risks, strength and balance exercises, medication review, home hazards, safe footwear, vision and falls, community mobility, and safety in public places.

RESOURCES

Visit www.health.utah.gov/vipp/older-adults/falls for more information.

FOR MORE INFORMATION ON THIS PROGRAM

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SOURCES

1. Utah Death Certificate Database. Utah Department of Health: 2010-2012
2. Utah Inpatient Hospital Discharge Data & Utah Emergency Department Encounter Database. Utah Department of Health; 2009-2011
3. Updated American Geriatrics Society/British Geriatrics Society Clinical Practice Guideline for Prevention of Falls in Older Persons. Journal of the American Geriatrics Society 2011;59:148-157
4. Clemson L, et.al. Journal of the American Geriatrics Society 2004;52:1487-1494

Suicide Prevention Training



WHY MAKE A REFERRAL?

- Family members and friends often don't know how to help their loved one or what to say when thoughts of suicide are present or when a loved one survives a suicide attempt. This training can provide practical conversation tips, methods to keep a loved one safe, and resources to get crisis intervention or outpatient help when needed.
- 45% of individuals who die by suicide visited their primary care provider in the month before their death, often to discuss complaints or health problems other than suicide. Physicians can be part of the solution to prevent suicide by identifying patients at risk and referring them to treatment.

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PROGRAM DESCRIPTION

Evidence based education for community members and professionals available at no cost, designed to increase participants' abilities to recognize someone at risk for suicide, engage them in a conversation about their thoughts of suicide, and support them in seeking professional care and staying safe. These trainings are targeted toward family members, social supports, and professionals engaging with a person at risk of suicide. Family members and friends often don't know how to help their loved one or what to say when thoughts of suicide are present or when a loved one survives a suicide attempt. This training can provide practical conversation tips, methods to keep a loved one safe, and resources to get crisis intervention or outpatient help when needed. Individuals can request a training for a group (work site, church, youth group, etc), or they can request to participate in an already scheduled training.

PROGRAM BENEFITS

Participants completing the program can expect to have:

- Participants completing the program can expect to have:
- Increased knowledge about myths and facts surrounding suicide
- Increased skills and confidence in how to identify and help a person at risk for suicide
- Increased skill in engaging in conversation with a person at risk for suicide
- Increased knowledge about crisis resources for suicide and when to seek them out
- Increased skills in keeping the individual safe by removing access to lethal means and taking other safety precautions when appropriate

WHAT IS PROVIDED TO PARTICIPANTS

- Information about what it means to have thoughts of suicide
- How to identify warning signs that someone might be thinking about suicide
- Practical advice and practice in asking a person directly about thoughts of suicide
- How to listen non-judgmentally and persuade the person to get help
- How to make their environment safe and where to refer them to professional help

RESOURCES

Visit www.utahsuicideprevention.org/education-training for more information.

FOR MORE INFORMATION ON THIS PROGRAM

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SOURCES

1. Utah Death Certificate Database. Utah Department of Health: 2010-2012
2. Utah Inpatient Hospital Discharge Data & Utah Emergency Department Encounter Database. Utah Department of Health; 2009-2011
3. Updated American Geriatrics Society/British Geriatrics Society Clinical Practice Guideline for Prevention of Falls in Older Persons. Journal of the American Geriatrics Society 2011;59:148-157
4. Clemson L, et.al. Journal of the American Geriatrics Society 2004;52:1487-1494

Traumatic Brain Injury Fund



UTAH DEPARTMENT OF
HEALTH
www.livingwell.utah.gov

WHY MAKE A REFERRAL?

TBI's in Utah

- Every day in Utah, 68 people are treated in an emergency department for a TBI; six people are hospitalized, and one person dies from a TBI.
- Falls (52%) were the leading cause of TBI hospitalizations, followed by transportation (24%) and sports or recreation (21%).
- TBI hospitalization rates increase with age; older adults aged 75+ have the highest rates of TBIs.
- The age-adjusted rate of TBI hospitalizations had a statistically significant increase from 2011 (816 per 100,000 population) to 2013 (826 per 100,000 population).

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PROGRAM DESCRIPTION

The Utah TBI Fund is used to contract for resource facilitation services; neuro-psychological assessments; education of professionals and the public regarding understanding, treatment, and prevention of TBI; and to support an information and referral system for persons with a TBI and their families. Resource facilitation is a process that helps individuals and families by providing short term support with problem solving and linking people in need with available and appropriate resources to assist with a successful return to school, work, or community reintegration.

TBIs resulted in nearly \$95 million in hospitalization charges in 2013; a 10.5% increase from \$86 million in 2011. This does not include costs for disability and long-term care, nor lost wages.

PROGRAM BENEFITS

- Participants completing the program report experiencing:
- Improved quality of life
- Decreased depression
- Better understanding of TBI for individuals and their families.
- Better family understanding of TBI
- Better treatment from medical providers

WHAT IS PROVIDED TO PARTICIPANTS

- Free initial assessment to see if one qualifies
- Participants are provided with a resource facilitator that is specially trained in the unique problems of individuals who suffer from TBI.
- Neuro-psychological assessment from a qualified provider.
- Family training

RESOURCES

Visit this website for more information:

www.health.utah.gov/tbi/

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SOURCES

1. www.health.utah.gov/vipp/pdf/TBIFund/TBI%20SCI%20Legislative%20Report%20SFY%2016.pdf

WHY MAKE A REFERRAL?

- Patients are more likely to quit when advised by a health care provider.
- Quit Line coaching can more than double a tobacco user's chances of quitting. Quit Line coaching combined with medication (such as NRT) can more than triple the chances of quitting.
- Those who successfully quit reduce their risk for stroke, heart disease, and a number of cancers and other diseases.
- Those who successfully quit save money.

PROGRAM DESCRIPTION

Quitting tobacco isn't easy. The Utah Tobacco Quit Line (1-800-Quit-Now) is a free telephone coaching program that can help tobacco users end their addiction. Waytoquit.org has information about the quit line as well as online coaching. Health professionals can make referrals by going to waytoquit.org/refer-patients.

WHAT IS PROVIDED TO UTAH'S TOBACCO QUIT LINE PARTICIPANTS

- A trained coach will talk with a participant to help them develop a personalized quit plan
- Receive up to five individually tailored sessions with a coach
- Get a self-help booklet and information about online resources
- Opt in for text messaging reminders and support
- Receive information about how to help a friend or family member to quit
- Discuss options for medications, including free Nicotine Replacement Therapy to eligible callers (youth are not eligible for NRT)

WHAT IS PROVIDED TO ONLINE COACHING PARTICIPANTS

- A personalized quit plan
- A quitting coach
- Guided processes for setting a quit date, conquering urges, choosing a medication, or getting social support
- Interactive lessons, worksheets, videos, articles, and podcasts
- Track progress and monetary savings
- Free Nicotine Replacement Therapy for eligible participants

RESOURCES

- Visit www.waytoquit.org or smokefree.gov for more information
- English: Call toll-free 1-800-QUIT-NOW (1-800-784-8669)
- English hours of operation 24 hours a day, 7 days a week
- Spanish: Call toll-free 1-855-DÉJELO-YA (1-855-335-3569)
- Spanish hours of operation 6 a.m. to 10 p.m. MST, 7 days a week

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WHY MAKE A REFERRAL?

- 1 in 5 Utah adults (410,000) report having been diagnosed with arthritis¹.
- 46.7% of adults with arthritis report being limited in their usual activities, work, or social activities¹.
- 23.3% of adults with arthritis report engaging in no physical activity¹.
- 48.5% of adults with arthritis report too little physical activity to meet national recommendations².

PROGRAM DESCRIPTION

The Walk With Ease Program is a community-based, group walking program specifically designed to help individuals start and maintain a safe walking routine. Trained instructors cover how to warm up and cool down, stretch, and set personal exercise goals. Each class also includes health education topics related to arthritis and exercise. Participants must be able to stand for at least five minutes.

PROGRAM BENEFITS

Participants completing the program report experiencing:

- Improved functional ability
- Decreased depression
- Decreased pain
- Increased confidence in one's ability to exercise

WHAT IS PROVIDED TO PARTICIPANTS

Classes meet three times per week for an hour. One session is 6 weeks long. After the initial session, participants are encouraged to maintain their walking routine by forming independent walking groups. Each class offers:

- Pre-walk discussion covering topics related to exercise and arthritis
- Warm-up and stretches
- Self-paced 10- to 40-minute walk
- Cool down and stretches
- Social interaction

Walk With Ease can also be delivered in a self-directed format with a workbook and weekly interaction with a trained leader to guide the participant.

RESOURCES

Visit www.livingwell.utah.gov for more information.

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SOURCES

1. 2014 Utah BRFSS Report
2. 2013 Utah BRFSS Report



Comparison of Programs to Support Self-Management for People with Diabetes & Prediabetes

Diabetes Self-Management Education/Training (**DSME/T**); Stanford's Diabetes Self-Management Program (**DSMP**); Stanford's Chronic Disease Self-Management Program (**CDSMP**); National Diabetes Prevention Program (**National DPP**)

DSME/T (ADA-recognized or AADE-accredited)	DSMP (Living Well with Diabetes)	CDSMP (Living Well with Chronic Conditions)	National DPP (National Diabetes Prevention Program)
Specific to diabetes	Specific to diabetes	Addresses all chronic conditions	Specific to those with prediabetes or at high risk for type 2 diabetes
Participants all have diabetes; family members welcome	Participants all have diabetes; family and others who assist can attend	Participants have a variety of chronic conditions; family and others who assist can attend	Participants have a diagnosis of prediabetes, or are at high risk for type 2 diabetes
Focuses on knowledge/skills	Focuses on action planning/ problem solving	Focuses on action planning/ problem solving	Focuses on nutrition, physical activity, stress management; goal is 5- 7% weight loss
Licensed Health Professional (Nurse, dietitian, pharmacist and/ or a certified diabetes educator) coach	Two lay leaders (at least one with diabetes)	Two lay leaders (at least one who has a chronic condition)	Lifestyle coach, can be a lay leader or Licensed Health Professional
Focuses on the medical management of the disease and 7 self-care behaviors: healthy eating, being active, monitoring, taking medication, problem solving, healthy coping, and reducing risks.	Focuses on management of lifestyle behaviors & emotional management	Focuses on management of lifestyle behaviors & emotional management	Focuses on lifestyle change (nutrition, physical activity)
Medicare, Medicaid, and private insurance reimbursement and allows for 10 hours (1-2 hours individual counseling; 8-9 hours in a group)	15 hours, all in group (2.5 hours/ week for 6 weeks; approximately 5 hours of diabetes content)	15 hours, all in group (2.5 hours/ week for 6 weeks)	Medicare reimbursement in 2018 Year-long program consisting of 16 sessions (1 hour/week) during the first phase and 6 follow up sessions (1 hour/month) during the second phase
There is variation among ADA recognized/AADE accredited DSME/T program content	No variation in content; scripted & timed content and processes for each session; random control trial tested	No variation in content; scripted & timed content and processes for each session; random control trial tested	Follows a CDC-approved curriculum

Continued on the next page...

DSME/T (ADA-recognized or AADE-accredited)	DSMP (Living Well with Diabetes)	CDSMP (Living Well with Chronic Conditions)	National DPP (National Diabetes Prevention Program)
<p><i>Content areas include:</i></p> <ul style="list-style-type: none"> • Diabetes disease process & treatment options • Incorporating nutrition management, physical activity, & utilizing medications • Monitoring blood glucose & using results to improve control • Preventing, detecting, & treating acute & chronic complications • Goal setting and problem solving • Integrating psychosocial adjustment • Preconception care and management during pregnancy (if applicable) 	<p><i>Content areas include:</i></p> <ul style="list-style-type: none"> • Diabetes disease process & treatment options • Incorporating nutrition management, physical activity, & utilizing medications • Monitoring blood glucose & using results to improve control • Preventing, detecting, & treating acute & chronic complications • Goal setting and problem solving • Integrating psychosocial adjustment 	<p><i>Content areas include:</i></p> <ul style="list-style-type: none"> • Techniques to deal with problems such as fatigue, pain, difficult emotions • Physical activity • Appropriate use of medications • Communicating effectively with family, friends, & health professionals • Healthy eating, weight management • Decision making 	<p><i>Content areas include:</i></p> <ul style="list-style-type: none"> • Fat/Kcal • Healthy eating • Physical activity • Problem solving • Taking charge of your environment • Difficulties of lifestyle change • Stress management • Staying motivated
<p>ADA recognized and AADE accredited DSME/T programs must the National Standards for Diabetes Self- Management Education and Support</p>	<p>Uniform content & processes allow for data aggregation across programs in different geographic areas.</p> <p>Reduced A1C demonstrated.</p>	<p>Uniform content & processes allow for evaluative data aggregation across programs in different geographic areas.</p> <p>Improved self-efficacy demonstrated.</p>	<p>Participant data, including weight and physical activity minutes, are tracked and reported to the CDC Diabetes Prevention Recognition Program (DPRP); organizations applying for CDC-recognition must achieve participant outcomes as outlined in the DPRP National Standards</p>
<p>Physician referral is required</p>	<p>No physician referral is required</p>	<p>No physician is referral required</p>	<p>No physician referral is required</p>

DSME/T addresses more content in fewer hours, typically engaging consumers soon after diabetes is diagnosed. DSME/T and CDSMP or DSMP complement each other, and provide disease-specific knowledge and skills along with practical problem-solving and action planning. CDSMP can complement the DSME/T programs. Compared to diabetes “support” groups, the CDSMP has more structure and accountability.

CDSMP and DSMP have not been evaluated for impact on prediabetes. The National DPP’s lifestyle change program is not designed for people with a diagnosis of diabetes. It is an evidence-based program for people with prediabetes (documented blood-based diagnostic test – blood glucose or A1c), a history of gestational diabetes, or those at high risk for type 2 diabetes identified through a self-administered Prediabetes Screening Test.



Linking Utahns to Quality Self-Management Education



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