

## **National Diabetes Prevention Program**

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The National Diabetes Prevention Program (DPP) was created in 2010 to address the increasing burden of prediabetes and type 2 diabetes in the United States. DPP is a Centers for Disease Control and Prevention (CDC) recognized lifestyle change program. The DPP life style change program allowed organizations to offer evidence-based, cost-effective interventions that help prevent type 2 diabetes. The program makes it easier for people with prediabetes or at risk for type 2 diabetes to participate in a high-quality program to reduce their risk of type 2 diabetes and improve their overall health.

DPP is a year-long program that participants can attend in person, online or a combination. The program includes at least 16 weekly sessions during the first six months and at least six monthly classes during the second six months. Participants learn to identify and address barriers to eating healthy and physical activity. The group and individuals problem solve, self-monitor food intake, weight and physical activity.

The Illinois Primary Health Care Association partnered with the Illinois Department of Public Health to establish a *Diabetes Prevention Program (DPP) Community of Practice* for Illinois health centers working toward diabetes prevention. The goal of the *DPP Community of Practice* is to help health centers establish their DPP and also provide technical assistance and support through this process. Elizabeth Hassinger is a DPP Lifestyle Coach, who is a Registered Dietician for Crossing Healthcare in Decatur, IL. Elizabeth leads the *DPP Community of Practice* technical assistance calls for IPHCA. We interviewed Elizabeth about her experience implementing DPP at a community health center.

### **How long have you been teaching DPP?**

I have been teaching DPP since 2016. I teach with another registered dietitian and we will rotate who teaches the lessons but are both always there for the classes.

### **What was the certification process like? Do you have to get recertified after so much time?**

We had to go through the Lifestyle Coach trainings before we were able to start the classes. After that we started getting our group of cohorts together to start the first session. You must turn in your DPP data every 6 months to CDC to keep your status. This data looks at how many participants you have had in the last 6 months, how many minutes of physical activity they get and what their weight is every week.

### **How much time outside of class does it take to run a successful DPP?**

The first few sessions we were spending more time out of class to prepare for the sessions, however the more you teach the class the more comfortable you get with curriculum. The most time we spend out of class now is when we are getting to start a new session. We run off reports of all our patients that fall within the prediabetes range and then call them to see if they are interested in participating in the class. Getting the data together every 6 months to submit is also time consuming. This year we have started to use DPP Express, which should make the data collection much easier.

DPP Express is a DPP session and outcomes tracking web-based charting system that follows HIPAA guidelines. DPP Express is easy to navigate, input and assess session data, and generate the CDC required report. Between our DPP classes we are always working to see how we can improve our success of the program.



**Why do you like DPP?**

My favorite part of DPP is the relationships that form between the participants in the sessions. They grow so close during our time together and to see those friendships form is the best. I also really like how the program holds you accountable to your goals. Most do not like to weigh in weekly but it really is one of the best ways to help you stay on track and stay accountable. I also like DPP for the lessons it teaches. They are very easy to understand and make all things seem so much more reachable and helps the participants feel like they really can make these changes in their lives.

**What advice would you give someone interested in starting a program?**

My advice would be to simply just start the program, try not to over think it. The scariest part of doing anything new is starting, so the faster you can start your first program the better you feel and the more confidence you will have in starting the next sessions. My advice would be to never get discouraged with the program. Our first session went great, all the participants finished, this however was not the case with second session where we only had 1 person finish the program. This could have made us frustrated, but instead we looked at what went well and changes that we could make to help the program be more successful.

**What's one of your favorite success stories?**

I remember the very first session I taught back in 2016, we had a patient start with an A1C of 6.4. This patient came to every session and really took to heart all the changes that were discussed. At the end of the program we tested her A1C and it was at a 5.6. The patient was so happy and started to cry, of course this made me tear up and she gave me a hug and said thank you. I told her she did all the work, I was just part of her support.

**Can someone contact you if they have questions about starting a DPP program?**

I would be happy to help anyone who is thinking about starting a DPP or answer any questions. If you'd like to learn more about starting a DPP at your health center you may contact Elizabeth Hassinger, [ehassinger@crossinghealthcare.org](mailto:ehassinger@crossinghealthcare.org) or IPHCA's Megan Williams, [mwilliams@iphca.org](mailto:mwilliams@iphca.org)

**References**

- Centers for Disease Control and Prevention. (2018).
- National Diabetes Prevention Program Coverage Toolkit. (2020).