Selected Evidence-Based Strategy Overview for Local Health Departments to Address Cardiovascular/Hypertension

Community & Clinical CONNECTIONS for Prevention & Health Branch NORTH CAROLINA DIVISION OF PUBLIC HEALTH

Title of Strategy: *Living Healthy* - Chronic Disease Self-Management Program (CDSMP)

Strategy Description:

Living Healthy is an evidence-based Chronic Disease Self-Management Program (CDSMP) coordinated statewide among various clinical and community partners. In most areas of the state, the coordinating agency is the regional Area Agency on Aging. The goal of implementing CDSMP (i.e., Living Healthy) is to enable adults to build self-efficacy in their ability to manage their health and to maintain active and fulfilled lives. The program is well-suited for participants with different chronic diseases because this program focuses on symptoms that are common to most chronic conditions (e.g., fatigue, stress, pain, anger and depression).

Living Healthy is a highly participatory workshop that takes place once a week for six consecutive weeks. Each 2 ½ hour session of the workshop is facilitated by two trained leaders (some of whom are volunteers) who follow a detailed manual so that each workshop is highly consistent. Subjects covered throughout the workshop include: (1) techniques to deal with problems such as frustration, fatigue, pain and isolation, (2) proper use of medications, (3) communicating effectively with friends, family, and health care providers, (4) appropriate exercise, (5) nutrition, and (6) making informed treatment decisions.

All NC counties have some capacity to provide Living Healthy; there is an identified Area Agency for Aging (AAA) for all counties, and all counties have a Living Healthy license in place through the AAA (or another partner such as CCNC). The AAA for any one county is the point of contact for information on Living Healthy. Almost all counties have lay leaders and/or master trainers that can teach the Living Healthy courses, except for some smaller counties that have temporarily lost capacity when the leader/trainer left. The cost to AAA to offer a CDSMP series is approximately $150 per person. There is no cost to local health departments for referring people to CDSMP. Participants can be charged on a sliding scale. Since pricing may vary, it is important to check with the AAA prior to referring potential participants. If a local health department would rather start their own Living Healthy Series, they will need to either obtain a license or provide the classes under the AAA license. There is a cost to obtain and maintain a site license and to train staff as lay leaders. The AAA may be able to provide the training at a discount, or training could be provided through Stanford University or various other entities. The AAA usually has not only the license but can often provide additional support for the books, trainers, space, etc. through their funding such that the cost would be minimal to offer Living Healthy in a county.

According to the CDC, “People with hypertension should be referred to evidence-based lifestyle programs that can increase hypertension control. These programs should promote the following elements: reduce weight, adopt DASH (Dietary Approaches to Stop Hypertension) eating plan principles including lower sodium intake, and engage in regular physical activity. For its designed general self-management purpose CDSMP has strong evidence, but it is not intended to increase control of high blood pressure.” However, many participants in the program have experienced reductions in blood pressure, blood glucose, trips to the Emergency Room and the number of medications needed. To read more about patient outcomes, please visit: http://patienteducation.stanford.edu/research/Review_Findings_CDSMP_Outcomes1%208%2008.pdf

How Health Departments Might Support This Strategy:

- Work with local AAAs and promote/refer to the CDSMP program.
- It will cost approximately $100 - $200 for a local health department to have someone trained, and this fee may be waived if the health department partners with AAA to offer classes in the community. In general, a local health department can minimize costs by partnering with their AAA (or, in rare instances, with the AAA partner such as CCNC).
- Document in your annual interim State of the County Health (SOTCH) report actions you are taking to address this evidence-based strategy in your county. Include this strategy when conducting and submitting your next Community Health Assessment (CHA).

Resources:

- http://www.ncdhhs.gov/aging/livinghealthy/livinghealthy.htm

Expected State Outcome(s):
Actions at the state and local level will contribute to better health for all North Carolinians.

Local Health Departments Will:

Promote reporting of blood pressure and A1C measures; and as able, initiate activities that promote clinical innovations, team-based care and self-monitoring of blood pressure.

Healthy NC 2020 Diabetes-Related Objective:
Reduce the cardiovascular disease mortality rate.

Contact Person(s):

Primary: Local (preferred): Area Agency for Aging (AAA); http://www.ncdhhs.gov/aging/livinghealthy/livinghealthy_regions.htm

Secondary: **Nicolle Miller; nicolle.miller@dhhs.nc.gov; (919) 855-3423**
Division of Aging and Adult Services, NC DHHS

NC County Health Departments Working on this Strategy:

Beaufort	Edgecombe	Macon	Polk
Bertie	Forsyth	Madison	Randolph
Bladen	Franklin	Martin	Rowan
Caldwell	Gates	McDowell	Rutherford
Camden	Granville	Mecklenburg	Sampson
Carteret	Guilford	New Hanover	Tyrell
Cherokee	Halifax	Northampton	Union
Chowan	Haywood	Orange	Vance
Clay	Hertford	Pasquotank	Washington
Currituck	Hyde	Perquimans	Wayne
Duplin	Jones	Person	
Durham	Lincoln	Pitt	

Community & Clinical CONNECTIONS for Prevention & Health Branch NORTH CAROLINA DIVISION OF PUBLIC HEALTH

This overview was produced by Community and Clinical Connections for Prevention and Health Branch, Chronic Disease and Injury Section, Division of Public Health, NC Department of Health and Human Services. For more information on the Community and Clinical Connections for Prevention and Health Branch, please visit www.communityclinicalconnections.com.