# 2023 Diabetes Self-Management Education Services (DSMES) “UP FOR IT” Learning Collaborative - Application

### EXECUTIVE SUMMARY

Researchers at the University of Kentucky are inviting you to take part in a learning collaborative that is focused on improving referrals to diabetes self-management education services (DSMES). The learning collaborative is a 9-month process by which healthcare organizations come together to learn from one another and from experts in the field and then undertake small tests of change to reach self-identified objectives within their own organization. The goals of this collaborative are to increase referrals to DSMES services by improving processes to identify patients who are eligible for DSMES, simplifying the referral mechanism, increasing knowledge of DSMES among providers, and increasing confidence and skills in referring eligible patients to DSMES.

The focus for the DSMES “UP FOR IT” Learning Collaborative will be to assist health care organizations to make “breakthrough” changes in the adoption and use of clinical systems and care practices to increase referrals to and attendance in DSMES. Targeted clinical outcomes will include improvement in glycemic control. Targeted clinical system changes will include clinical decision support within the EHR for Diabetes Self-Management Education and Support (DSMES) referral, the establishment of bi-directional referral processes with DSMES providers, and other evidence-based care practices. Clinical participants will track referrals for DSMES and A1C values. DSMES providers will partner with organizations to track attendance of DSMES sessions.

The structure for this collaborative will be based on the Institute for Healthcare Improvement (IHI) Breakthrough Series. At the heart of this approach are three models. A Learning Model makes participating practices part of a network of experts and fellow-learners. The Chronic Care Model (CCM), developed by Ed Wagner MD, MPH, and former Director of the MacColl Institute for Healthcare Innovation, outlines all the elements of good chronic care. The Model for Improvement enables teams to rapidly test and implement changes to improve care.

Participants will join in conference calls, virtual meetings, technical assistance, and webinars with experts and other organizations in the Collaborative. The support and opportunities for this Up for It Learning Collaborative will be provided without charge to selected participating organizations. Dates subject to change.

### COLLABORATIVE TIMELINE

February 17, 2023, 12pm-12:30pm EST Informational Call

**March 17, 2023, 5pm EST Applications Due**

March 24, 2023, 5pm EST Decisions Announcement

April 12, 2023, 12pm-1pm EST Kickoff Call

April-June 2023 Data Validation Meetings

April-June 2023 Work on pre-work assignments

May 12, 2023 Baseline Data Due

**July 26 & 27, 2023, 12pm-5pm** EDT **Learning Session 1**

**Action Period 1:**

August 9, 2023, 12-1pm EDT Monthly TA Call and Webinar

September 13, 2023 12-1pm EDT Monthly TA Call and Webinar

October 11, 2023 12-1pm EDT Monthly TA Call and Webinar

**November 1, 2023 12-5pm EDT Learning Session 2**

**Action Period 2:**

December 13, 2023 12-1pm EST Monthly TA Call and Webinar

January 10, 2024 12-1pm EST Monthly TA Call and Webinar

February 14, 2024 12-1pm EST Monthly TA Call and Webinar

**March 20, 2024 12-5pm EDT** **Learning Session 3**

**April-September 2024 Post-Collaborative Monthly Reporting Period**

### MEASUREMENT STRATEGY

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Measures Name | Measure Type | NQF | Reporting Source | Data Source | Baseline  | Monthly Reporting Element |
| Core Measures |
| DSMES Referral  | Process | NA | Individual Clinic-level | EHR report/Manual Count | CY 2022 | Yes |
| DSMES Attendance/Completion | Outcome | NA | Local Health Department HLWD team | Manual Count | CY 2022 | Yes |
| Monitored Measures |
| A1C Poor Control (>9%) | Outcome | 59 | Individual Clinic-level | EHR (eCQM) | CY 2022 | Yes |

* Provide 2022 Baseline data and Patient Demographic information no later than May 12, 2023 to prepare for data validation and pre-work activities.
* Required Data Elements:
* Monthly data for Core & Monitored Measures, PDSA tracking, and progress self-assessments due to KYREC advisors by the 10th of each month starting in July 2023 through October 10th, 2024. *(ex: July 2023 data will be due August 10, 2023)*

### WHO CAN JOIN THE UP FOR IT DSMES LEARNING COLLABORATIVE?

In order to address the study-related aspect of this project, participating organizations must meet certain criteria to participate and will include:

* Each healthcare organization must have **a minimum of 3 to 4 total separate clinical locations** within their organizations willing to participate in this project. Clinical locations within an organization will be randomly divided into primary and secondary locations for the purposes of this study.
	+ **Primary locations (Collaborative Participants):** (up to 2 locations per organization) will participate in the DSMES “UP FOR IT” Collaborative, report monthly data, as defined in the measurement strategy and receive training & Health Information Technology-related support in developing a mechanism for sending referrals to a designated DSMES provider.
		- Collaborative locations will refrain from any spread activities or implementation initiatives outside of the Population of Focus (PoF) until the conclusion of the study measurement period on September 30, 2024.
	+ **Secondary location (Study Control):** (up to 2 locations per organization) will report monthly data, as defined in the measurement strategy and receive training & Health Information Technology-Related support in developing a mechanism for tracking referrals to DSMES but will not attend or participate in any activities related to the DSMES “UP FOR IT” Collaborative.
		- Secondary location(s) will agree to **not participate** in any spread activities or initiatives, developed by the Collaborative Participants within their organization, until the conclusion of the study measurement period on September 30, 2024.
* All locations must be within the state of Kentucky; providers/clinicians within an organization cannot cross-cover between Collaborative or Study Control locations.
	+ Each site must:
		- Be in operation for longer than one year.
		- Have at least two full-time staff members.
		- Serve 100 or more adult patients who currently have diabetes.
		- Have time and capacity to participate in this project.
		- Have ability to report required measures at the clinic level through CEHRT.

### EXPECTATIONS OF LEARNING COLLABORATIVE PARTICIPANTS

Learning Collaborative members must agree to participate in the following activities over the period of April 2023-September 2024.

Each learning collaborative member is expected to actively participate in learning collaborative sessions LS1, LS2, LS3), monthly Technical Assistance (TA) calls and educational webinars.

* Attend all sessions, with at least 2 representative from the improvement team at each session/meeting
* Complete pre-work, data validation, and prepare clear goals before Learning Collaborative Session 1.
* Form and regularly meet with your improvement team to share successes, identify challenges, and discuss next steps for practice and system improvements.
* Participate in conducting and reporting out small tests of change (PDSA).
* Submit required monthly data elements via Microsoft Teams and use data to measure progress.
* Share results on a regular basis within the Collaborative.

### TEAM FORMATION

Each Collaborative Participant location agrees to establish an improvement team consisting of at least three or more members. Study Control Participants do not need to form an improvement team, however the parent organization will be required to report monthly data for the control site(s).

Ideally, improvement teams should include, whenever possible:

* Executive-level staff person\*
* Mid-level supervisor or clinical manager\*
* Frontline staff member
* Clinician/Provider
* Data/Reporting/HIT staff member\*

\*These members may be shared across improvement teams from the same parent organization

### RESOURCES AND SUPPORT PROVIDED BY LEARNING COLLABORATIVE EXPERTS

The University of Kentucky, UK HealthCare, the Kentucky Department for Public Health (DPH), Kentucky Health Information Exchange (KHIE) and Kentucky Regional Extension Center (KY REC), are the resources for organizations participating in the DSMES “UP FOR IT” Learning Collaborative. These organizations will provide materials, expertise, small financial incentives and forums for organizations to accomplish the goals they set out for themselves as a part of the Learning Collaborative. However, organizations must be prepared to provide their staff with the time, flexibility, support, and resources to accomplish these goals. More specifically, these organizations will:

* Organize, plan, and implement learning collaborative meetings, educational webinars, and monthly TA calls;
* Provide provider education and expertise in electronic bi-directional referrals and DSMES and as well as organizational expertise related to shifting to a quality improvement model; and
* Gather data on Collaborative Progress and report to the National Institute of Health (NIH)

### SELECTION PROCESS

Two healthcare organizations will be selected to participate in this Collaborative. Selection will be based, in part, on the capacity and ability of the organization to rapidly address quality improvement around DSMES referrals, and accessibility and availability of DSMES resources. Applications will be submitted electronically to the collaborative director and reviewed by the Planning Team. An informational session will be provided on 2/17/23 for interested parties to receive an overview of this initiative and research study. Please contact the Collaborative Director for a link to the recording. Notification of selection will be announced no later than March, 24, 2023.

### PARTICIPATION INCENTIVES FOR COLLABORATIVE PARTICIPANT ORGANIZATIONS

The University of Kentucky, through the DSMES “UP FOR IT” Collaborative, will provide practice payments to offset costs associated with participation in terms of time, administrative support, data collection/reporting, provider/staff training up to $12,000 for practice participation in the learning collaborative. The Collaborative leadership team will provide evidence-based information on the subject matter, advisory support in the application of that subject matter, and methods for process improvement, both during and between Learning Sessions, and gather data on Collaborative Progress and report to the National Institute of Health (NIH).

Each organization will receive practice payment installments after both Learning Sessions 1 & 2 for the completion of pre-work activities, monthly reporting, webinar participation, advisory meeting and learning session attendance. A final practice payment will be provided at the conclusion of the Post-Collaborative Reporting Period for participation in Learning Session 3 and continued data reporting through September 2024. Healthcare organizations will receive payments for each collaborative participant location (up to 2 sites) – a total payment up to $12,000.

### SUBMITTING THE APPLICATION

**Applications must be received electronically by KY REC by noon ET on March 17, 2023. Incomplete applications may not be reviewed.** Applicants will be notified via email of decisions by March 24, 2023. **Submit applications to:** **jeelli2@uky.edu**

If you have any questions regarding the application or participation requirements, please contact Jessica Elliott, Collaborative Director, via email: **jeelli2@uky.edu****.**

### LEARNING COLLABORATIVE APPLICATION QUESTIONS

|  |
| --- |
|  |
|  Organizational Contact & DemographicsInformation |
| Healthcare Organization Name |  |
| Address |  |
| Primary Contact |  |
| Primary Contact Title |  |
| Primary Contact Email |  |
| Primary Contact Phone |  |
| Total Number Of Primary Care Sites/Locations Within Organization |  |
| Organizational CApacity |
|  EHR Vendor/Version |  |
| Will The Organization Be Changing EHR Vendors Or Do You Have Any Planned Upgrades In 2023 Or 2024? |  |
|  All Clinical Locations Utilize The Same EHR (Y/N, Please Explain If No) |  |
| Is Your EHR Capable Of Identifying Your Patient Population By Unique Clinical Location/Site? (Y/N, Please Explain If No)  |  |
| Does Your EHR Have The Capability To Electronically Track Referrals Internally and/or Externally?  |  |
| Can Your Organization Pull Reports To Monitor DSMES Referrals Sent and/or Completed? |  |
| Do You Currently Collect And Monitor A1c Performance Using NQF #59 Specifications? |  |
| Are You Able To Generate A Report Listing All Patients With Diabetes Across Your Organization? |  |
| If Yes, What Is Your Total Diabetes Population? |  |
| Do You Currently Refer Patients To Receive DSMES? |  |
| Does Your Organization Have A Recognized Or Accredited DSMES Educator Within The Organization? |  |
| Do You Utilize DSMES Resources Outside Of Your Organization? (If So, Please List) |  |
| CLinical Location Contact & DEmographics |
| Are You Able To Identify Your Patient Population With Diabetes By Clinical Location/Site? |  |
|  |
| *Please list the Unique Sites within your organization that would participate in this project. Sites will be randomly selected to be Collaborative Participant locations or STudy Control Locations by the selection team.* |
| Site 1 |
| Clinic Name |  |
| Address |  |
| Primary Contact & Role/Title |  |
| Primary Contact Email/Phone | Email: | Phone: |
| Total # Of Providers At This Site |  |
| Do Providers At This Location Cross-Cover To Any Other Clinical Locations In This Study? Please List Providers And Locations |  |
| Total # Of Patients With Diabetes At This Location |  |
|  |
| Site 2 |
| Clinic Name |  |
| Address |  |
| Primary Contact & Role/Title |  |
| Primary Contact Email/Phone | Email: | Phone: |
| Total # Of Providers At This Site |  |
| Do Providers At This Location Cross-Cover To Any Other Clinical Locations In This Study? Please List Providers And Locations |  |
| Total # Of Patients With Diabetes At This Location |  |
|  |
| Site 3 |
| Clinic Name |  |
| Address |  |
| Primary Contact & Role/Title |  |
| Primary Contact Email/Phone | Email: | Phone: |
| Total # Of Providers At This Site |  |
| Do Providers At This Location Cross-Cover To Any Other Clinical Locations In This Study? Please List Providers And Locations |  |
| Total # Of Patients With Diabetes At This Location |  |
|  |
| Site 4 |
| Clinic Name |  |
| Address |  |
| Primary Contact & Role/Title |  |
| Primary Contact Email/Phone | Email: | Phone: |
| Total # Of Providers At This Site |  |
| Do Providers At This Location Cross-Cover To Any Other Clinical Locations In This Study? Please List Providers And Locations |  |
| Total # Of Patients With Diabetes At This Location |  |
|  |

Does the organization agree to provide monthly performance data for each location detailed in the Measurement Strategy Section, listed above, monthly by the 10th day of each month? (use “x” to indicate)

* Yes
* No

**As the Organizational Leader, I commit to:**

* Provide the team with the resources, including time, materials and equipment, access to local experts, and support necessary to implement the selected changes.
* Hold team members accountable for initiating, maintaining, and evaluating the goals and tasks set out for themselves as a part of the collaborative.
* Facilitate the implementation of successful changes throughout the organization.
* I agree to the commitments set forth in this document. (use “x” to indicate)

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Name of Organizational Leader or Representative (Applicant Primary Contact)

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Date