**Portland Area SDPI Grantee Survey July 2013**

**1. What is the name of your site and SDPI grant program?**

**2. Who is the primary contact person(s) for your SDPI program?**

**3. What SDPI Best Practice(s) are you currently implementing?**

**4. For each Best Practice you have chosen, please list one or two grant activities your program is actively coordinating. What are the highlights of these activities that you can share with the TLDC?**

**5. Please share any media about your SDPI program activities.**

**6. What are the current challenges your SDPI grant program is facing? What are the plans for overcoming these challenges?**

**7. What feedback or comments do you have for the TLDC or Indian Health Service Director, in the interests of continuation and advancement of your diabetes prevention/treatment program?**

**8. We sincerely appreciate your time and effort to contribute this important information about your SDPI program to the TLDC. Any other comments are welcomed.**

1. Warm Springs Community-Based SDPI Program

2. Edmund Francis; 541-553-2460; Edmund.francis@wstribes.org Tammy Wilson; 541-553-2459; [Tammy.wilson@wstribes.org](mailto:Tammy.wilson@wstribes.org)

3. Breastfeeding Support

Physical Activity for Diabetes Prevention and Care

Youth and Type 2 Diabetes Prevention and Treatment

4. Breastfeeding: Data Collection Phase Youth and Type 2 Diabetes Prevention: Developing a pre-assessment tool for use in 6-12 year olds; planning sports camps and programs for summer activities to encourage fitness/exercise participation Physical Activity: Just completed a 16 week "Movin' Mountains" Weight loss challenge in the community (co-sponsored with St. Charles Hospital-Madras). This challenge had remarkable results for some participants with up to 40 pound weight losses!

5. No Response

6. The only challenge we are facing at this point is getting enough qualified community members to instruct exercise programs in the community. We do have 3 new volunteers and will be sending them to training soon.

7. No Response

1. Spokane Tribe of Indians Spokane Tribal Diabetes Program

2. Jessie Stensgar 509-258-4517 ext. 143 [jessies@spokanetribe.com](mailto:jessies@spokanetribe.com)

3. Diabetes/Pre-Diabetes Case Management

Physical Activity for Diabetes Prevention and Care

Youth and Type 2 Diabetes Prevention and Treatment

4. Case Manager provides one-on-one DM education, JVN's, and coordinates care to our 242 DM patients. Youth Sports Recreation League; 30 children completed outdoor soccer league; flag football will be completed in the fall. Youth DM screenings will take place Sept/Oct. at Wellpinit S.D. grades 3-12. Wellness Coaching and Personal Training will soon be offered to DM patients and also to pre-diabetics upon credentialing completion.

5. Link to Spokane Tribe Health & Fitness FB page <https://www.facebook.com/spokanetribe.healthfitness?fref=ts>

6. Current challenges include lack of personnel. Our program staff consists of 3; we continuously seek methods to hit the largest population in the most effective manner.

7. I have been on leave, just received this email. I apologize for the delayed response.



1. Swinomish

2. Michelle Skidmore 360-466-3167

3. Physical Activity for Diabetes Prevention and Care

4. Data collection for PA diabetes registrants and clinic patients. Moving for Diabetes PA case management program

5. No Response

6. Lack of funds for incentives. As local tribal consortium for funds.

7. No Response

1. Confederated Tribes Coos, Lower Umpqua and Siuslaw Indians Diabetes program.

2. Sara Long 541-297-0191 Smlong@ctclusi.org Diann Weaver 541-888-7502 [Dweaver@ctclusi.org](mailto:Dweaver@ctclusi.org)

3. Best Practices:

Community Diabetes Screening

Diabetes Prevention

4. For our Best Practice Community Diabetes Screening, we have monthly dinners in the different outreach areas where Tribal members attend. We do blood sugar testing at these. We offer also an alternative which is the diabetes-risk paper screen. We do a raffle draw of a fitness/health related item for all participants of the screenings. We do educational mini-presentations at these and offer educational materials. For our Best Practice Diabetes Prevention we have a weight loss Challenge. Participants receive educational materials throughout the 16 week program on goal setting, nutrition and physical activity. They get frequent emails and communication from staff. Each participant gets an incentive fitness item.

5. Some links to our Tribal newsletter which shows some tribal family dinner announcements and picture and write up of a past event.

http://ctclusi.org/system/files/coos%20april%202013%20final\_1.pdf http://ctclusi.org/system/files/coos%20marrch%202013%20lite.pdf

6. One of our challenges is reaching out to more of the tribe and getting their involvement. One way we are overcoming this is the diabetes coordinator and other staff will be attending other tribal events that have large numbers or tribal member attendance, such as the Annual Salmon Ceremony, Restoration, the Christmas Dinner, elder activities and youth activities. At these functions we will be able to provide screenings and education.

7. No Response

1. Coquille Indian Tribe Community Health Center

2. Kelle Little, RD, CDE Health and Human Services Administrator

3. Best Practices:

Diabetes/Pre-Diabetes Case Management

Diabetes Self-Management Education (DSME) and Support

4. The Coquille Indian Tribe funds an RN Case Management who partners with the CHR for home visits which focus on improving utilization of Diabetes Case Management through referral, follow-up, education and monitoring of blood pressure, foot health, and blood glucose in the home. For Diabetes Self-Management Education the Coquille Indian Tribe offers individual and group Diabetes Education opportunities which include a healthy meal and the opportunity for peer support.

5. No Response

6. The funding is not adequate to support a part time Registered Dietitian C.D.E. and a Diabetes Program Case Manager, both of these functions are critical to improving our population’s capacity for managing their diabetes. In addition, reauthorization for SDPI has been for short periods of time which leads to instability and insecurity,

7. No Response

1. Sauk-Suiattle Indian Tribe

2. Jean Wessel 360-436-2210 jeanw@sauk-suiattle.com and [jean.wessel@yahoo.com](mailto:jean.wessel@yahoo.com)

3. Best Practices:

|  |
| --- |
| Adult Weight and Cardiometabolic Risk Management and Diabetes Guidelines |
| Oral Health Care |
| Physical Activity for Diabetes Prevention and Care |

4. Yearly health fair - focusing on physical fitness, oral health, and diabetes awareness this year The Big Walk - a yearly hike over a Cascade Mt trail into Eastern WA following old trade routes. Practice hikes and walks occur for the 3-4 months before the hike to promote ongoing fitness.

5. The hike co-coordinator developed a power point to promote the hike. We are extending an invitation to other local tribes to join us.

6. Staff turnover is our biggest challenge. We attempt to bring new staff members up to date with grant activities as quickly as possible. Currently we are not using EHR. Call back notices are not computer generated. Efforts are being made to streamline our patient call back notices.

7. **No Response**

1. Native American Rehabilitation Association of the NW (NARA) Diabetes Treatment & Prevention Program- Portland, OR

2. Alison Goerl RD, LD- Diabetes Program Manager 503-230-9875 Ext 334 [agoerl@naranorthwest.org](mailto:agoerl@naranorthwest.org)

3. Best Practices:

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| Diabetes Self-Management Education (DSME) and Support |
| Diabetes Eye Care |

4. Eye Care- implemented JVN retinal camera in Sept 2010. Diabetic Retinopathy screening rates have improved 20% since implementation. DSME- Offering diabetes education to all patients with diabetes at two different locations in our health system.

5. Article in the Oregonian: http://www.oregonlive.com/health/index.ssf/2012/05/portland-area\_native\_americans.html NARA JVN Best Practices were highlighted in IHS Clinical Rounds in May 2013 <http://ihs.adobeconnect.com/p9rboy1hgto/>

6. Funding levels have stayed the same over the past 14 years; however, it costs more to provide care to our patients with diabetes and prediabetes. Furthermore, our screening efforts have helped us diagnose more people earlier in the disease process that need care. To overcome the challenge of not having sufficient funding we have applied for additional grants from other funding agencies to help us care for our patients and meet grant objectives.

7.

From Oregon Live article (http://www.oregonlive.com/health/index.ssf/2012/05/portland-area\_native\_americans.html)

“Since 2004, NARA and the Southern Oregon Diabetes Prevention Consortium -- which includes [Coquille,](http://www.coquilletribe.org/) [Cow Creek Band of Umpqua](http://www.cowcreek.com/) and [Klamath tribes](http://www.klamathtribes.org/) -- also have focused on prevention by changing lifestyles.

They offer pre-diabetic patients 16 classes by doctors, counselors and dietitians on new ways to cook, eat and exercise. Patients get a life coach. They are expected to quit drinking alcohol and to lose 7 percent of their weight. They meet regularly in small groups for a year.

"You can prevent diabetes," says Alison Goerl, the NARA diabetes manager. "A lot of the success is in the relationships we develop with the patients."

The Southern Oregon program has worked with 170 pre-diabetics since it began and less than 5 percent developed diabetes.

That doesn't seem like many given the scope of the problem. But word is getting out and community programs are replicating the Native practices for all Americans, says Sharon Stanphill, Cow Creek health director.

NARA has taken 86 pre-diabetics through its program so far and only four got the disease.

Shirley Stigall, 69, of North Portland, a member of the Wintun tribe, attended the weekly courses two years ago. She continues to write down what she eats and weighs in at NARA once a month. She cooks more and eats more fruits and vegetables since she got her lower dentures. She lost 30 pounds and three inches at her waist.

"I have everything under control," she says. "I'm going to have to take care of myself sooner or later so I might as well do it now."

1. Yellowhawk Tribal Health Center

2. Teresa Jones, RN 541-278-7515 [teresajones@yellowhawk.org](mailto:teresajones@yellowhawk.org)

3. Best Practices:

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| Diabetes Self-Management Education (DSME) and Support |
| Physical Activity for Diabetes Prevention and Care |

4. Community Outings Yellowhawk snow-shoe outing on Feb 2 with about 15 participants; target audience was CTUIR community members Headstart gardening for 2 classes of children ages 3-5yo; 20 in each group for a total of 40; planted marigolds in community garden In July last yr. and this year, we will repeat our Headstart walks to the garden for plant identification, tasting and then back to our cooking room for cooking what we picked. Last year, we had 15 students each day. This year will be twice per week.

5. Last week, we were on the local radio talk show. It was myself, and two recently diagnosed patients talking about how it feels to get diagnosed, and how they are dealing with it. I'm supposed to be getting a taped version of it soon.

6. Last week, we were on the local radio talk show. It was myself, and two recently diagnosed patients talking about how it feels to get diagnosed, and how they are dealing with it. I'm supposed to be getting a taped version of it soon.

7. Teresa Jones, RN, MN Works with Confederated Tribes of Umatilla Reservation (CTUIR) Yellowhawk Tribal Health Center SDPI Grant Community Outings Yellowhawk snow-shoe outing on Feb 2 with about 15 participants; target audience was CTUIR community members Headstart gardening for 2 classes of children ages 3-5yo; 20 in each group for a total of 40; planted marigolds in community garden In July last yr. and this year, we will repeat our Headstart walks to the garden for plant identification, tasting and then back to our cooking room for cooking what we picked. Last year, we had 15 students each day. This year will be twice per week. Nurses Diabetes Training via IHS/AADE collaboration 15 Jan Behavior change and goal setting-6 attended 6 Feb-Insulin Therapy, Patient Education, and Treatment Individualization: The Next Generation-5 attended 5 Mar-Concepts & Controversies in Type 2 Diabetes: Experts Review the Evidence-3 attended 2 Apr-Behavior Change and Motivational Interviewing-5 attended 9 Apr-10 Foods to reduce cardiac risks-5 attended 30 April-Metabolic Syndrome & Diabetes-5 attended Community Diabetes Screenings 1 Feb Senior Center-6 attended 1 Mar Senior Center-1 attended 14 Mar 14 Mar Family Fun Night-on planning committee and participated with healthy snacks and presented sugar content in soft drinks; screened about 15 people for diabetes; attended by about 150 people 21 Mar Nixyaawii Community School (NCS) diabetes and height/weight screenings; attended by 14 teens 5 April Senior Center-7 attended 11 Apr Cayuse Tech diabetes screenings; attended by 9 people; target audience was employees there 3 May Senior Center-8 attended 15 May NCS-4 attended 29 May Wildhorse Casino-16 attended Public Outreach 1 May “Open Mic” with Alanna French (Outreach Consultant) no one came 6 May “Open Mic” with Alanna French (Outreach Consultant) no one came 18 May-Yellowhawk Fun Run-on planning committee; collected registration fees and conducted community outreach; set up kiosk & obtained surveys on public interest in our Diabetes programs; about 65 competitors in attendance with families 23 May Open Mic with Alanna French-2 attended 5 Jun-talked on our local radio regarding our diabetes program and interviewed diabetes patient

1. Nooksack Indian Tribe

2. Barbara Himes 360-966-2106 [bhimes1999@yahoo.com](mailto:bhimes1999@yahoo.com)

3. Best Practice: Diabetes Self-Management Education (DSME) and Support

4. Provide individual and group education on Diabetes Self-Management We continue to offer monthly diabetes clinics 2- the diabetes program planned and conducted a Community diabetes Health Fair with 17 booths from tribal programs as well as outside vendors. A healthy lunch and talk on "Taking Control" was provided. Participants received supplies and information on staying healthy with diabetes and preventing diabetes in community members at risk.

5. You may contact Sandra Bura at sandrabura@yahoo.com for some pictures of war canoe races and possibly some traditional foods activities. The diabetes program supports a war canoe team with sweatshirts and lifejackets and is planting a garden at the clinic as well as some gathering activities with youth programs.

6. We have difficulty getting our patients to come in regularly, especially those with very high A1Cs. We are sending reminders to those who have not been in and call them before our diabetic clinics and encourage them to schedule.

7. No response



Nooksack War Canoe

Nooksack June 2013 newsletter



1. Suquamish Tribe Community Health Programs

2. Barbara Hoffman, DNP, RN, CDE 360-394-8468 [bhoffman@suquamish.nsn.us](mailto:bhoffman@suquamish.nsn.us)

3. Best Practices:

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| Breastfeeding Support |
| Community Nutrition Education and Policy Development |
| 4. WIC clinic monitors Breast Feeding rates. We have a poster campaign that features local tribal member BF pairs. These posters are located throughout the community. We are actively working on establishing a sugar sweetened beverage policy. It is still being debated by tribal council. We have a 9 month long education program at the Early Learning Center where we work on increasing fruit and vegetable consumption with Head Start students. We have done this for several years and it has been very successful. We actively engage the parents in this process. We are partnering with the County Health Department in a 5-2-1-0 campaign. We have established "Water Wednesdays". In this program fruit infused water is provided in a variety of area (admin building, Human Services office, counseling offices, high school, Elders Lunch and at the Wednesday Walking Group). We aim to encourage water over other beverages, we have been doing this for 8 weeks, the feedback has been very positive. We have gathered a few stories one of which has been published in the tribal newsletter.  5. We have a Facebook page that has digital stories, flyers for activities etc. on it.  Search for Suquamish Community Health on Facebook. The June newsletter article about the infused water can be accessed at:  [www.issuu.com/suquamish](http://www.issuu.com/suquamish) |

6. We receive a relatively small SDPI grant and we combine funding to carry out our programs. This year the other funding we relied on was cut and we have to be very creative, partner with other programs and discontinue some activities.

7. I could not copy the pictures into the form but if you would like pictures just email me.

1. Northwestern Band of the Shoshone Nations Diabetes Program

2. Hunter Timbimboo, 435-237-8066, [htimbimboo@nwbshoshone.com](mailto:htimbimboo@nwbshoshone.com)

3. Best Practices:

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| --- |
| Diabetes Eye Care |
| Foot Care |
| Nutrition for Diabetes Prevention and Care |
| Physical Activity for Diabetes Prevention and Care |
| 4. Healthy Eating Classes with Utah State University  5. Can’t attach, will send  6. Tribal Membership is not condensed. Most members are spread across 250 miles of Urban areas. We have no recreation building or a place that Natives frequent. We send out newsletters and utilize social media.  7. No Response  http://www.nwbshoshone-nsn.gov/tribe/health/images/main.jpg  NW Shoshone -  http://www.nwbshoshone-nsn.gov/tribe/images/govmain2.jpg |
|  |
|  |
| |  |  | | --- | --- | |  | “The Northwestern Band of the Shoshone Nation health department in hopes of aiding the fight against cancer has created diabetes safe recipes” | |

1. Quileute Health Center

2. Julie Windle 360-374-4159 [julie.windle@quileutenation.org](mailto:julie.windle@quileutenation.org)

3. Best Practices:

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| --- |
| Diabetes Self-Management Education (DSME) and Support |
| Foot Care |

4. Podiatry Clinic every 3 months, the next will be on June 28st. We look to see which diabetic patients are due for diabetic foot exams and make it a priority to get them scheduled. We also have a yearly diabetic shoe clinic where we provide high quality professionally fitted shoes; this is also scheduled for June 28th. Foot care is provided every week for diabetic patients here at the clinic. For DSME, we have a Diabetes Support group that meets twice a month. We provide a diabetes-friendly breakfast follow by an educational film or lecture. Our next support group meets Tuesday June 25th. We are currently in the process of holding a contest to see which patients can lower their BMI's to a healthy level. The Quileute Diabetes Support Group also had a booth at our annual health fair on May 30th, where we provided bananas and almonds as a healthy snack. We also provided literature and answered questions regarding diabetes.

5. Unfortunately, I am unable to upload media here. We did have several articles in our local newspaper and announcements on the Quileute Nation web site (http://talkingraven.org/). We also produce flyers to announce each support group meeting. We have videos and photos of our Diabetes Support Group participants in addition to the Annual Health Fair where our support group participates.

<http://talkingraven.org/?p=1292> (Fitness challenge comes to La Push – article)

<http://talkingraven.org/?p=1302> (Summer Food Program for Tribal School)

6. Mostly getting patients to show up for their appointments with the podiatrist and participate in support group meetings. I think offering incentives i.e.: new shoes, breakfast and prizes could help. I also think when patients can finally see all the benefits of a healthy lifestyle, others will notice and want to make changes too.

7. No Response

1. Samish Indian Nation IHS Area: Portland Samish Diabetes Program

2. Mitch Markovich, RN (360) 588-4509 [mmarkovich@samishtribe.nsn.us](mailto:mmarkovich@samishtribe.nsn.us)

3. Best Practice: Cardiovascular Health and Diabetes

4. To assist patients with diabetes improve and maintain healthy blood pressure readings, we launched the Samish Cardiovascular Risk Reduction Program which provides educational information and tools and equipment to encourage active healthy lifestyle behaviors that will reduce cardiovascular risks. Patients are furnished with a Cardio-Exerciser Toolkit. Each toolkit contains a step pedometer and exercise fitness bands with workout guide sheets. Additional items in the toolkit include: A pedometer walking resource guide, diet and nutrition educational information and healthy weight resources and web page tools.

5. The Samish Indian Nation's Diabetes Program presents a Diabetes Healthy Heart Conference and Wellness Gathering each year in the spring. This well attended annual event provides inspiring valuable information, resources and services to motivate and assist members in the prevention, management and control of diabetes and heart disease. This annual Samish health and wellness gathering is the most important and largest health and wellness gathering of its kind that is put on by the Samish Tribe. The annual Samish program includes a Diabetes and Healthy Heart Conference offering innovative educational assistance delivered by distinguished medical professionals, comprehensive diabetes and healthy heart screenings and a host of Health Exhibitors.

6. One of the major challenges we have encountered is finding successful ways to help patients who smoke to quit and stay quit! We will provide case management counseling employing the concepts of Motivational Interviewing and readiness for change. We will provide resources such as referrals to tobacco quit line smoking cessation counselors and encourage patients to discuss the use of nicotine replacement therapy and/or medication with their providers and cessation counselors.

7. No Response

*The Elders/Caregiver program provides a healthy lunch and social interaction for elders five days a week. Lunch is served Monday-Thursday and breakfast on Fridays. Every Wednesday lunch is served at Tribal Administration building where blood pressure checks and diabetes counseling are offered from the Samish Health Nurse.*

**7TH ANNUAL SAMISH HEALTH AND WELLNESS GATHERING** **Diabetes and Healthy Heart Conference “Becoming a Champion”  
Date:**  April 6, 2013  
**Time:**  9:00 a.m. to 3:00 p.m.  
**Location:** Fidalgo Bay Resort 4701 Fidalgo Bay Road Anacortes, Washington 98221  
**Details:** Gourmet Catered Lunch Provided All New Conference “Taking Control” with Guest Speaker Frank Atherton, Native American A1C Champion! Sharing Stories, Advice and Choices to Help Prevent and Control Diabetes and Heart Disease This is a Free Event!  Open to Samish Tribal Members, Their Families and Friends! Free Diabetes Screenings – No Fasting or Reservation Required! Free Therapeutic Massages – No Reservation Required! New Health Fair Exhibits. Free Conference Tote Bags Filled with Health and Wellness Products.

1. KOOTENAI TRIBE OF IDAHO SDPI PROGRAM

2. KAREN HANSON 208-267-5223 EXT. 528 [karen@kootenai.org](mailto:karen@kootenai.org)

3. Best Practices

Nutrition for Diabetes Prevention and Care

4. BRINGING IN REGISTERED DIETICIAN/CERTIFIED DIABETES EDUCATOR QUARTERLY

5. No response

6. COMPLIANCE WITH NUTRITIONAL RECOMMENDATIONS AND FOLLOW-UP

7. No Response

1. Puyallup Tribal Health Authority

2. Shelley Wallace 253-593-0232 ext. 396 [swallace@eptha.com](mailto:swallace@eptha.com)

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| --- |
| 3. Best practices  Breastfeeding Support |
| Diabetes/Pre-Diabetes Case Management |
| Community Diabetes Screening |
| Diabetes Self-Management Education (DSME) and Support |
| Youth and Type 2 Diabetes Prevention and Treatment |

4. Diabetes Days about six times year working on policies about Breastfeeding and other wellness concepts. Metabolic screening and education routinely in our lobby as well as at all community wellness events. Diabetes prevention education for youth at any and every opportunity including culture day, field day, GREAT Camp, Kids Wellness Challenge and Pediatrics School Days, Healthy Ways. Regularly cooking classes both on and off-site and Family Food Adventure cooking with kids. Fitness is Fun and Try It, You Might Like It fitness opportunities. Beginning to utilize protocols in Next Gen which will be a valuable tool for diabetes management.

5. Our calendar of classes, diabetes days and community wellness events is published the tribal newspaper twice per month and can be found online:

<http://www.puyalluptribalnews.net/news/view/join-the-2013-wellness-challenge/>

6. Still transitioning to the new EHR and learning how to best utilize this system for comprehensive diabetes care and management. Currently undergoing a remodel and addition which is exciting but will require flexibility and adaption; will resolve by year end. Working on creating a stronger relationship with the school is an ongoing challenge. Increasing participation in diabetes self-management is an ongoing challenge. Continuing to seek ways to address diabetes prevention among young children and youth.

7. Will we get to hear what others are doing? Thank you