



CARDI•OH

Ohio Cardiovascular and Diabetes Health Collaborative



In partnership with:



Cardi-OH ECHO

*Innovations in Diabetes and
Cardiovascular Health*

February 16, 2023

Remember, during all case presentations and discussions...



Assistance & Contact Information



- Use the Chat feature to ask questions or contribute to the discussion at any time
- Feel free to unmute during Q&A or discussion
- If you have any questions or concerns, do not hesitate to reach out to us.
 - **Technology concerns or troubleshooting**
 - Rick Cornachione, IT Support: rx553@case.edu; 440-796-2221
 - **General comments or questions**
 - Claire Rollins, Clinic Coordinator: ceh68@case.edu; 216-926-1676
 - Goutham Rao, MD, Facilitator: Goutham.Rao@UHhospitals.org

About Cardi-OH

Founded in 2017, the mission of Cardi-OH is to improve cardiovascular and diabetes health outcomes and eliminate disparities in Ohio's Medicaid population.

WHO WE ARE: An initiative of health care professionals across Ohio's seven medical schools.

WHAT WE DO: Identify, produce, and disseminate evidence-based cardiovascular and diabetes best practices to primary care teams.

HOW WE DO IT: Best practices resources are available via an online library at Cardi-OH.org, including monthly newsletters, podcasts, webinars, and virtual clinics using the Project ECHO® virtual training model.

[Learn more at Cardi-OH.org](http://Cardi-OH.org)



*In
partnership
with:*



Today's Presenters

FACILITATOR

Goutham Rao, MD, FAHA
Case Western Reserve University

DIDACTIC PRESENTER

Goutham Rao, MD, FAHA
Case Western Reserve University



LEAD DISCUSSANTS

Goutham Rao, MD, FAHA
Case Western Reserve University

Chris Taylor, PhD, RD, LD
The Ohio State University

CASE PRESENTERS

Megan Sizemore, PharmD
UT Comprehensive Care Center, Family Medicine

Melissa Thomas, PhD, MSPH, MSA, MCHES, C.CHW
Ohio University Heritage College of Osteopathic Medicine

Disclosure Statements



- The following speakers have a relevant financial interest or affiliation with one or more organizations that could be perceived as a real or apparent conflict of interest in the context of the subject of their presentation*:
 - Danette Conklin, PhD; Kathleen Dungan, MD, MPH; Ian Neeland, MD; Adam T. Perzynski, PhD; Goutham Rao, MD; Christopher A. Taylor, PhD, RDN, LD, FAND; Yasir Tarabichi, MD; Jackson Wright, MD, PhD
- The remaining speakers have no financial relationships with any commercial interest related to the content of this activity:
 - Karen Bailey, MS, RDN, LD, CDCES; Kristen Berg, PhD; Elizabeth Beverly, PhD; Carolyn Ievers-Landis, PhD; Kelsey Ufholz, PhD; James Werner, PhD, MSSA
- The following members of the planning committee DO NOT have any disclosures/financial relationships from any ineligible companies:
 - Shari Bolen, MD; Richard Cornachione; Carolyn Henceroth; Gillian Irwin; Michael Konstan, MD; Elizabeth Littman; Devin O'Neill; Steven Ostrolencki; Ann Nevar; Claire Rollins; Catherine Sullivan

* These financial relationships are outside the presented work.

** For more information about exemptions or details, see www.acme.org/standards

Patient Empowerment



Goutham Rao, MD, FAHA

Chief Clinician Experience and Well-Being Officer, University Hospitals Health System

Jack H. Medalie Endowed Professor and Chairman

Department of Family Medicine and Community Health

Division Chief, Family Medicine, Rainbow Babies and Children's Hospital

Case Western Reserve University School of Medicine & University Hospitals Cleveland Medical Center

Learning Objectives



1. Define patient empowerment
2. Describe empowering patients to seek high-quality care for the prevention of cardiovascular disease
3. Describe an approach to patient empowerment within a busy primary care practice

Let's talk about gaps in care.



- Consider this:
 - Among patients with both diabetes and established cardiovascular disease, only 57.9% have controlled blood pressure.
 - Why?
 - Lack of guidelines?
 - Lack of quality measures and standards and associated provider incentives?
 - Lack of innovative models of care?

“Certainly there is no lack of tools, programs, and models of care, many of which are linked to financial incentives for physicians for their effective use, available to improve quality and the lack of such resources cannot explain widespread quality problems in the United States.”

Explanations



Clinical Inertia

- The failure to establish appropriate targets and escalate treatment to achieve goals.
- Clinical inertia is a potential cause of care gaps only when three conditions are met:
 - There is a certain implicit or explicit guideline; The physician believes the guideline applies to the patient; The physician has the resources to apply the guideline (including time).
 - If all 3 conditions are met, but the physician does not follow the guideline, clinical inertia is said to be the cause.

Patient Factors

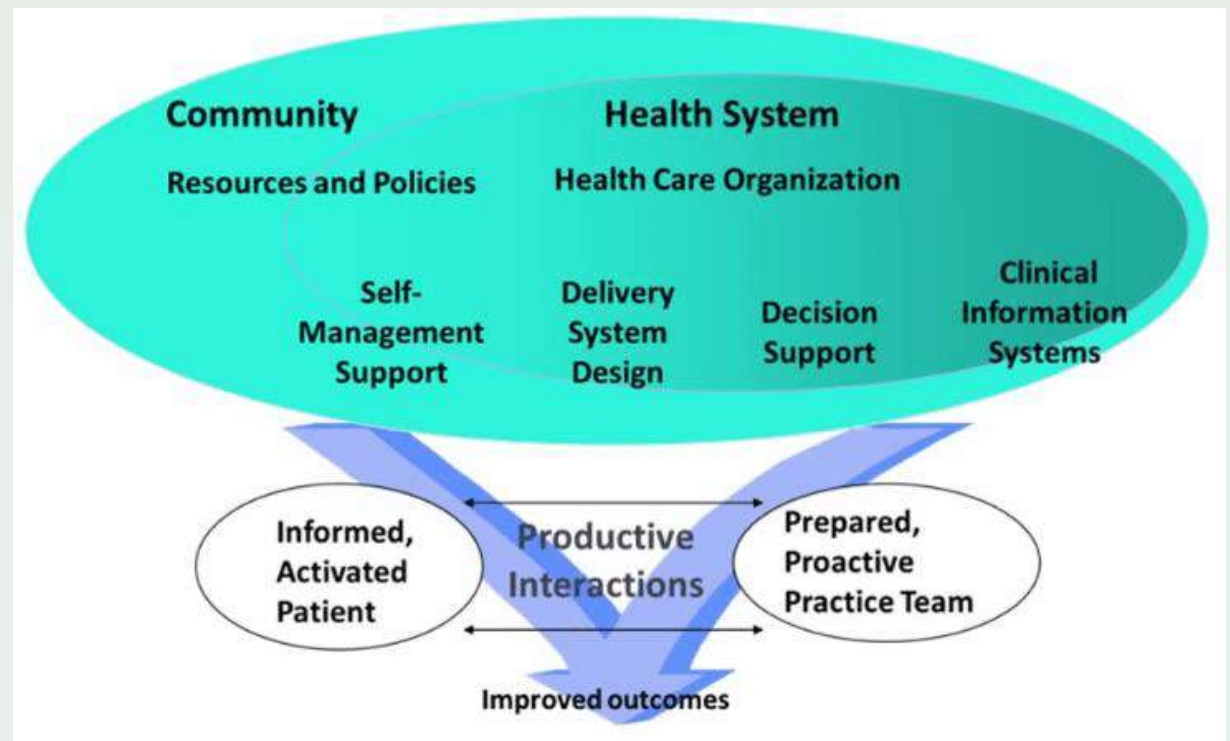
- Poor engagement with care.
- Limited interest in self-management, including lifestyle modification.

System Factors

- Time and productivity pressures.
- Primary care structure poorly designed for management of chronic illnesses such as type 2 diabetes.

Solutions

Chronic Care Model



Solutions



Shared Decision Making: an approach where clinicians and patients share the best available evidence when faced with the task of making decisions, and where patients are supported to consider options, to achieve informed preferences.

Patient Activation: a patient's willingness and ability to take independent action to manage their health and overall care. There is strong evidence that more activated patients have better outcomes. For example, more activated patients with diabetes are more likely to perform foot checks, obtain eye examinations and exercise regularly compared to less activated patients.

Empowerment

Defined as a, “means to promote autonomous self-regulation so that the individual’s potential for health and wellness is maximized”.



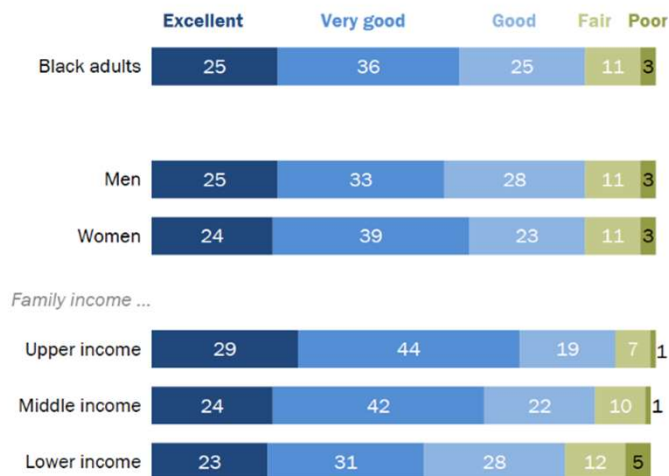
Pew Research Center Survey

Published April 2022



Majority of Black adults give positive ratings to the quality of health care they've received most recently

% of Black adults who rate the quality of care they received most recently from doctors or other health care providers as ...



Note: Respondents who did not give an answer are not shown. Family income tiers are based on adjusted 2020 earnings.

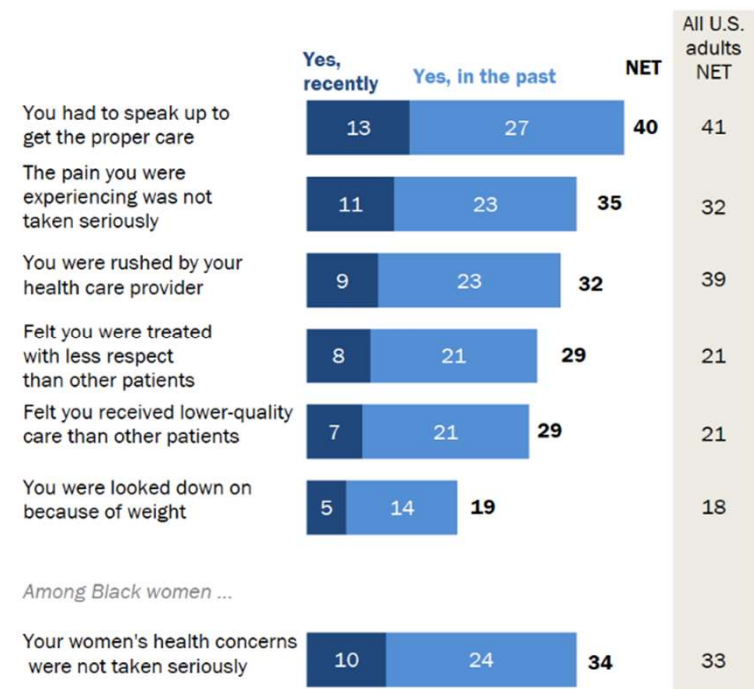
Source: Survey conducted Nov. 30-Dec. 12, 2021.

"Black Americans' Views of and Engagement With Science"

PEW RESEARCH CENTER

40% of Black adults say they've had to speak up to get proper medical care

% of Black adults who say they have ever experienced each of the following problems when dealing with doctors or other health care providers



Note: Respondents who gave other responses or did not give an answer are not shown.

Source: Survey conducted Nov. 30-Dec. 12, 2021.

"Black Americans' Views of and Engagement With Science"

PEW RESEARCH CENTER

EMPOWER (Enhancing My Patients Ongoing Well-Being through Empowerment and Review) Diabetes Checklist



EMPOWER Diabetes Checklist

Answer each of the 12 questions below by circling "Yes", "No" or "Unsure/Can't Remember." If your answer is "No" or "Unsure/Can't Remember" make sure to discuss the question with your doctor at today's appointment.

1) Has your doctor discussed improving control of your diabetes?

Yes No Unsure/Can't Remember

2) Has your doctor talked to you about changing or adding medicines to help get your diabetes under control?

Yes No Unsure/Can't Remember

3) Did your doctor talk to you about medications to prevent further heart disease?

Yes No Unsure/Can't Remember

4) Has your doctor discussed your blood pressure?

Yes No Unsure/Can't Remember

5) Did your doctor check and discuss your cholesterol within the past year?

Yes No Unsure/Can't Remember

6) Has your doctor talked to you about diet and exercise to improve your diabetes?

Yes No Unsure/Can't Remember

7) If you smoke, has your doctor discussed quitting smoking?

Yes No I don't smoke/Unsure/Can't remember

8) Has your doctor checked your urine in the past year?

Yes No Unsure/Can't Remember

9) Have you had your eyes checked by an eye doctor in the past year?

Yes No Unsure/Can't Remember

10) Has your doctor offered you a flu shot?

Yes No Unsure/Can't Remember/No flu shots available

11) Does your doctor know who the most important people in your life are?

Yes No Unsure

12) In caring for you, does your doctor consider all the factors that affect your health?

Yes No Unsure

Empowering Patients



- *“What questions do you have about your visit today?” VS. “Do you have any questions about your visit?”*
- *“What do you believe you need to better manage your diabetes?” VS. “Here’s what you need to do to better manage your diabetes.”*
- *“How can I help you achieve your goals?” VS. “You need to be more consistent in taking your medication.”*



Thank you!

Questions/Discussion

Webinar | Wednesday, February 22, 2023 | 12 - 1 p.m. ET

The Intersection of Weight Management and Diabetes Care



KEYNOTE SPEAKER

Benjamin O'Donnell, MD

Associate Professor

Division of Endocrinology,
Diabetes, and Metabolism

Medical Director of Medical
Weight Management

The Ohio State University Wexner
Medical Center

OBJECTIVES

- Describe the epidemiology of obesity and its intersection with diabetes.
- Understand the role of glucagon-like peptide-1 receptor agonists (GLP-1 RA) and sodium-glucose cotransporter-2 inhibitors (SGLT2i) for diabetes and weight loss.
- Prescribe effective and necessary lifestyle modifications as an accompaniment to pharmacological therapy.



Register at [Cardi-OH.org](https://www.Cardi-OH.org)

CME credit provided at no cost.



CARDI•OH
Ohio Cardiovascular and Diabetes Health Collaborative

Ohio Cardiovascular and Diabetes Health Collaborative

Reminders



- A Post-Clinic Survey has been emailed to you.
Please complete this survey **by Friday at 5:00 PM.**
- We need more cases! Email Claire if you have an additional case to submit

CME Accreditation Statement:

This activity has been planned and implemented in accordance with the accreditation requirements and policies of the Accreditation Council for Continuing Medical Education (ACCME) through the joint providership of the Ohio State Medical Association (OSMA) and The MetroHealth System. The Ohio State Medical Association (OSMA) is accredited by the ACCME to provide continuing medical education for physicians. The MetroHealth System designates this educational activity for a maximum of 1.0 *AMA PRA Category 1 Credit(s)*[™]. Physicians should only claim credit commensurate with the extent of their participation in the activity.

Other Healthcare Professionals: check with your professional association as these credits might be applicable for hours towards licensure renewal.

The Ohio Cardiovascular and Diabetes Health Collaborative is funded by the Ohio Department of Medicaid and administered by the Ohio Colleges of Medicine Government Resource Center. The views expressed in this presentation are solely those of the authors and do not represent the views of the state of Ohio or federal Medicaid programs. **20**