

# Diabetes Prevention Recognition Program (DPRP)

**Welcome to the Country's Largest Network  
of Diabetes Prevention Programs!**

National Diabetes Prevention Program  
Division of Diabetes Translation  
Centers for Disease Control and Prevention

National Center for Chronic Disease Prevention and Health Promotion

Division of Diabetes Translation

[www.cdc.gov/diabetes](http://www.cdc.gov/diabetes)



**Please mute phones and submit additional questions after the presentation to:**

**[dprpAsk@cdc.gov](mailto:dprpAsk@cdc.gov)**

# Presentation Outline

1. OVERVIEW OF THE NATIONAL DIABETES PREVENTION PROGRAM (NATIONAL DPP) AND THE DPRP
2. BENEFITS OF RECOGNITION
3. GETTING STARTED
4. DPRP REQUIREMENTS: PENDING AND FULL RECOGNITION
5. UNDERSTANDING YOUR REPORTS
6. INTERVENTION DURATION AND INTENSITY
7. STRATEGIES FOR SUCCESS
8. DPRP TECHNICAL ASSISTANCE
9. ADDING OR CHANGING CONTACT INFORMATION
10. Q & A

# **Overview of the National DPP and DPRP**

# Overview of the National DPP

In the Diabetes Prevention Act of 2009, Congress authorized CDC to establish the National DPP

- 1 The core of the National DPP is a CDC-recognized, year-long lifestyle change program that offers participants:



- 2 To successfully implement these lifestyle change programs, the National DPP relies upon a variety of public-private partnerships including: community organizations, private insurers, employers, health care organizations, faith-based organizations, and government agencies. Together, these organizations work to:



# Overview of the DPRP

**Mission:** The DPRP assures quality & fidelity to scientific evidence by recognizing organizations that meet the standards required to deliver effective lifestyle change programs

## Major Roles



### Quality Standards

- Standards revision (per scientific advances & stakeholder feedback)
- Translation of standards to organizations / stakeholders
- Analytics (e.g., organizations' achievements against standards)



### Technical Assistance

- Assistance with the recognition process (e.g., alternative curriculum review)



### Registry of Organizations

- Database maintenance (i.e., updating registry based on organizations' recognition level)

# National Registry of Organizations

[https://nccd.cdc.gov/DDT\\_DPRP/Registry.aspx](https://nccd.cdc.gov/DDT_DPRP/Registry.aspx)

## Diabetes Prevention Recognition Program – Registry of Recognized Organizations

Location:

GO

[Online or Combination In-Person/Online Organizations](#)

[Export Full Registry](#)

FIND A PROGRAM NEAR YOU

### Recognized Organizations - Alabama

★ Organization has achieved full CDC recognition

Results per page:

1 - 6 of 6

<a href="#">Organization</a> ▲	<a href="#">Address</a>	<a href="#">City</a>	<a href="#">State</a>	<a href="#">Zip Code</a>	<a href="#">Phone Number</a>	<a href="#">Website</a>	<a href="#">Class Type</a>	<a href="#">Who can participate?</a>
Cahaba Medical Care Foundation	405 Belcher St.	Centreville	AL	35042	(205) 926-2992	<a href="http://www.cahaba...">http://www.cahaba...</a> ↗	In-person	Public
Family Medical Services Pharmacy	1817 13th Ave. North	Bessemer	AL	35020	(205) 424-3194		In-person	Public
Pack Health	3613 6th Ave. S	Birmigham	AL	35222	(855) 255-2362	<a href="http://www.packheal...">http://www.packheal...</a> ↗	Online	Public
Poarch Creek Indian Health Department Diabetes Prevention Program	5811 Jack Springs Rd	Atmore	AL	36502	(251) 368-9136	<a href="http://PoarchCreek!...">http://PoarchCreek!</a> ↗	In-person	Public
Providence Hospital Diabetes Center	6801 Airport Blvd.	Mobile	AL	36685	(251) 633-1987		In-person	Public
The YMCA of Greater Birmingham	2101 4th Avenue	Birmingham	AL	35203	(205) 801-7224	<a href="http://www.ymcabh...">http://www.ymcabh...</a> ↗	In-person	Public

# National Registry of Organizations

[https://nccd.cdc.gov/DDT\\_DPRP/Programs.aspx](https://nccd.cdc.gov/DDT_DPRP/Programs.aspx)

## Diabetes Prevention Recognition Program - Find a Program Near You

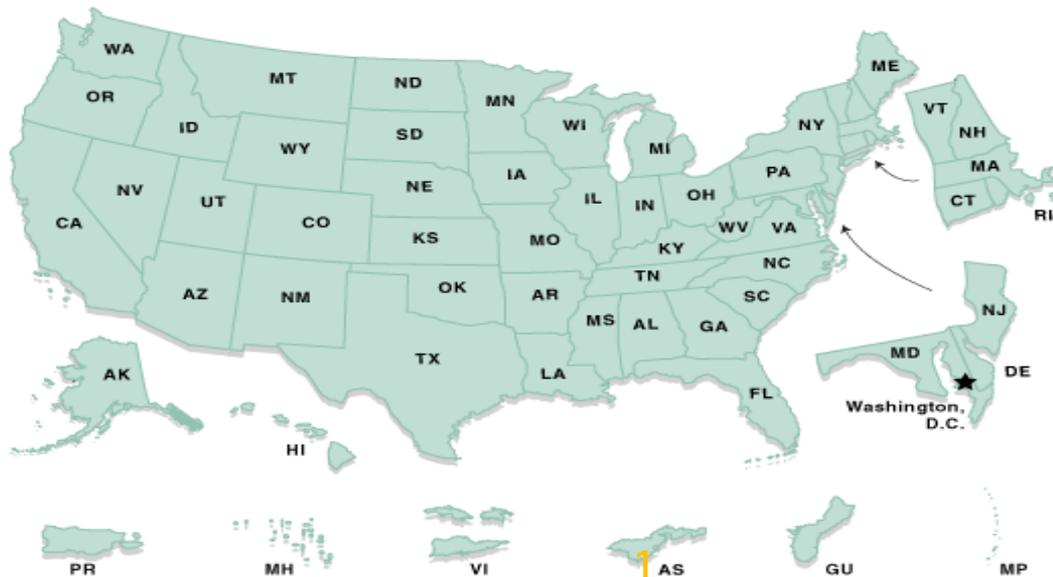
Find a program near you by selecting your state or territory. Or, find an online or combination in-person/online program by selecting that link to the right. Some online providers may also have an in-person program. Please contact the organization for in-person program locations.

[Online or Combination In-Person/Online Programs](#)

**REGISTRY OF RECOGNIZED ORGANIZATIONS**

Location:

 [Export Full Program List](#)



# Benefits of Recognition

# What are the benefits of recognition?

- **RECOGNITION AND ADHERENCE TO THE STANDARDS CAN ASSIST ORGANIZATIONS WITH:**
  - ✓ Monitoring against the scientific evidence around diabetes prevention
  - ✓ Effective program delivery through a commitment to **requirements** designed for program success regardless of geography or setting
  - ✓ Quality recognition that supports the case for reimbursement from public and private insurers and employers
  - ✓ Sustainability of effective diabetes prevention

# Getting Started

# How do we do this successfully?

- **ABILITY TO BEGIN OFFERING THE LIFESTYLE PROGRAM WITHIN 6 MONTHS OF RECEIVING APPROVAL FROM CDC**
- **CAPACITY AND COMMITMENT TO DELIVER THE PROGRAM OVER AT LEAST 1 YEAR, INCLUDING AT **LEAST 16** SESSIONS DURING THE FIRST 6 MONTHS AND AT **LEAST 6** SESSIONS DURING THE LAST 6 MONTHS**
  - ✓ Appendix A of the 2015 DPRP Standards: Organizational Capacity Assessment  
<http://www.cdc.gov/diabetes/prevention/pdf/dprp-standards.pdf>
  - ✓ For each Capacity Topic with a “No” or “Unsure” consider:
    - Working with your organization’s leadership to enhance the Organizational Capacity Topic
    - Partnering with an existing DPRP recognized organization in your community

- MUST USE A CDC-APPROVED CURRICULUM**  
**CDC's New *PreventT2* English and Spanish Curriculum**  
**Available Since Early March 2016**



## Participant Guide

Introduction to the Program

**PREVENTT2**  
A PROVEN PROGRAM TO PREVENT OR DELAY TYPE 2 DIABETES



## Guía del participante

Introducción al programa

**PREVENGA ELT2**  
Un programa para prevenir el tipo 2 de la diabetes

- **UNDERSTAND YOUR APPROVAL AND EFFECTIVE DATES AND MAP OUT YOUR COLLECTION TIME FRAMES FOR THE 12 MONTHS OF EACH PROGRAM YEAR**
- **UNDERSTAND HOW TO ENTER, MONITOR, AND SUBMIT YOUR DATA**
  - ✓ Attend the Data Entry “Submit for Success” webinar
- **ORGANIZATIONS ARE MONITORED AND EVALUATED FOR PROGRESS AGAINST THE STANDARDS**
  - ✓ Each submission’s worth of data is evaluated separately
  - ✓ Data is not carried over or added to another submission
- **UNDERSTAND WHO IS EVALUATED**
  - ✓ Participants who attend their first session during the 12 month program period
  - ✓ Participants who are eligible based on a blood test, risk test , or history of GDM
  - ✓ Participants who attend four or more sessions during the 12 month program

# **DPRP Requirements: Pending and Full Recognition**

# **DPRP Requirements: Pending Recognition**

## **Requirement 1: DPRP Application Submission**

## **Requirement 2: DPRP Approved Curriculum**

- ✓ The lifestyle change program should be based on content within the DPRP Standards
- ✓ As of March 2016, the new PreventT2 Curriculum was publicly available for use
- ✓ The 2012 National DPP curriculum is also still available for use
- ✓ Other CDC-approved curricula are available as well
- ✓ If you plan to submit an alternate curriculum, you must submit it in its entirety with your application and allow 4-6 weeks for review

## **Requirement 3: Intervention Duration is a full 12 months**

## **Requirement 4: Intervention Intensity**

# **DPRP Requirements: Full Recognition**

**Requirement 5: Session Attendance During Months 1-6**

**Requirement 6: Documentation of Body Weight**

**Requirement 7: Documentation of Physical Activity Minutes**

**Requirement 8: Weight Loss Achieved at Six Months**

**Requirement 9: Session Attendance During Months 7-12**

**Requirement 10: Weight Loss Achieved at 12 Months**

**Requirement 11: Program Eligibility Requirement**

# Understanding Your Reports

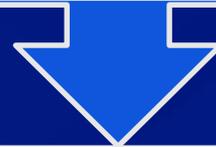
## Annual Reporting of DPRP Data

- ✓ All reports evaluate program results under the 2015 Standards
- ✓ Recognized organizations are expected to deliver a 12-month lifestyle intervention
- ✓ Organizations will receive a report for each year of program participation

# Annual Monitoring of DPRP Data

12 Month Data

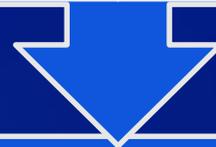
Progress Report



24 Month Data (Evaluation of Year 1 Data)

Pending Recognition

Full Recognition



36 Month Data (Evaluation of Year 2 Data)

Full Recognition

Loss of Recognition

# DPRP Progress Report: 12 Months

- **12 MONTH PROGRESS REPORT**
  - ✓ Analysis is based on all participants that attended sessions from the organization's approval date to data due date at 12 months (year 1)
  - ✓ The report provides feedback on an organization's progress toward achieving Full recognition, which cannot be determined until at least 24 months
  - ✓ Very rarely is 365 days of data reported at this point

# DPRP Evaluation: 24 Months

- **24 MONTH FULL RECOGNITION STATUS DETERMINATION**
  - ✓ The report provides a full evaluation of the 11 requirements to achieve Full Recognition status
  - ✓ Analysis is based on participants starting in months 1-12 (year 1)
  - ✓ Requirements 5-11 require that participants have completed the full 12 month lifestyle change program (from the date of the first sessions to the report due date) to be analyzed

# DPRP Evaluation: 36 Months

- **36 Month Full Recognition Status Determination**
  - ✓ Provide full evaluation of 11 requirements to determine Full recognition status
  - ✓ Analysis based on participants starting in months 13-24 (year 2)
  - ✓ Organization loses recognition at this point if not meeting all requirements (unless the organization achieved full recognition at 24 months)

**CDC Diabetes Prevention Recognition Program (DPRP)**  
*Annual Report*

**Organization Profile**

DPRP Organization: Fictitious ABC Health  
 Organization Code: 123456  
 Organization Start Date: 02/17/2012  
 Organization Effective Date: 03/01/2013 (annual data due based on this date)  
 Current Evaluation Year Number: 3  
 Date of Last Evaluation: 03/01/2015

**Results of Recognition Evaluations**

Last Year Evaluation Outcome: Full  
 Current Evaluation Outcome: Full - Loss of Recognition next evaluation if not met again

**Participant Statistics:**

<i>Evaluated participants who attended their first session in</i>	<u>Total Enrolled</u>	<u>Total Ineligible</u>	<u>Total Eligible Evaluated</u>
Year 1	18	0	18
Year 2	3	1	2
<b>Overall Total</b>	<b>21</b>	<b>1</b>	<b>20</b>

**Participant Eligibility Information**

**Total Participants Enrolled:** 3

- Number excluded without Glucose Test, Risk Test, or History of GDM: 0 (0% of enrolled)
- Number excluded with less than 4 sessions in 12 months: 1 (33.3% of enrolled)

**Total Participants Eligible for Analysis:** 2 (66.7% of enrolled)

**Breakdown of Participants Eligible for Analysis:**

**Total Participants Eligible for Analysis:** 2

**Prediabetes Determination:**

- Number with Glucose Test or History of GDM: 1 (50% of eligible for analysis)
- Number with Risk Test: 1 (50% of eligible for analysis)

**BMI Minimum Values Not Met:** 0 (0% of eligible for analysis)

Evaluation of Current Year Data Against DPRP Standards Requirements (Req.) for Full Recognition:

Req. 5	Sessions attended during months 1-6	11.0	(Met)
Req. 6	Documentation of body weight	100.0%	(Met)
Req. 7	Documentation of physical activity minutes	66.7%	(Met)
Req. 8	Weight loss achieved at 6 months	4.8%	(Met)
Req. 9	Sessions attended during months 7-12	2.5	(Not Met)
Req. 10	Weight loss achieved at 12 months	8.2%	(Met)
Req. 11	Program eligibility requirement (i.e., at least 50% of participants with Blood Test or History of GDM)	50.0%	(Met)

**Next Year 'Look Ahead' Data Report**

The following information provides you a preliminary view of data that is available for your participants in year 4.

Participant Eligibility Information

Total Participants:	5
Blood Test or GDM:	40.0%
Risk Test:	60.0%
No Test:	0.0%
BMI Not Met:	0 (Total # of participants in program not meeting BMI value $\geq 24$ or $\geq 22$ if Asian)
Session < 4:	0 (Total # of participants in program for more than 6 months who attended less than 4 sessions)

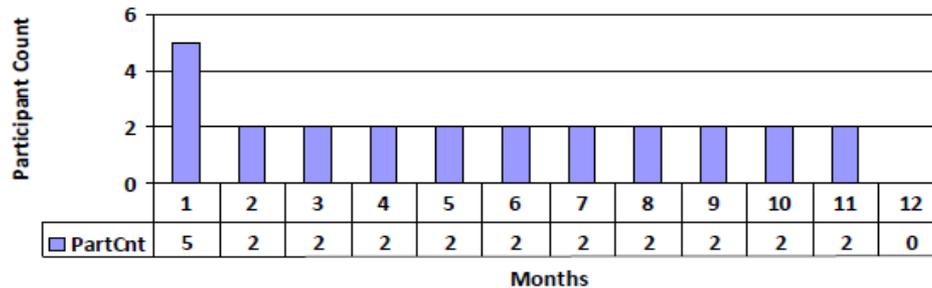
Participants' Progress by Program Months

Months 1-6 are cumulative results; months 7-12 begins a new calculation of the information

<u>Month</u>	<u>Number of Participants</u>	<u>Avg. Number of Sessions Attended</u>	<u>Avg. Percent Weight Documentation</u>	<u>Avg. Percent PA Documentation</u>	<u>Avg. Percent Weight Loss</u>
1:	5	3.8	94.7%	26.3%	0.5%
2:	2	9.0	100.0%	55.6%	1.2%
3:	2	14.0	100.0%	71.4%	1.8%
4:	2	15.0	100.0%	73.3%	2.6%
5:	2	16.0	100.0%	75.0%	3.3%
6:	2	17.0	100.0%	76.5%	3.7%
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7:	2	1.0	100.0%	77.8%	4.5%
8:	2	2.0	100.0%	78.9%	4.3%

9:	2	3.0	100.0%	80.0%	4.8%
10:	2	4.0	100.0%	81.0%	5.4%
11:	2	5.0	100.0%	81.8%	5.8%
12:	0	N/A	N/A	N/A	N/A

**Number of Participants in Program by Month**



### Summary and Recommendations

At this annual reporting period, CDC evaluates organizations' data to determine the recognition status. The DPRP Standards and Operating Procedures state that organizations must meet all of the recognition standards in order to be awarded Full Recognition. Fictitious ABC Health was evaluated based on the 2015 Standards and did not meet the following requirements:

- Weight loss achieved at 6 months
- Session attendance during month 7-12

However, since . Fictitious ABC Health achieved Full Recognition status at the 24-month interval, your organization will have two consecutive years to fully meet the DPRP Standards and maintain Full Recognition. At this time, . Fictitious ABC Health will retain Full Recognition status and remain on the DPRP national registry.

Data from . Fictitious ABC Health show that participants were involved in the program an average of 172 days from the first session to the last session, and the average number of sessions attended by participants who attended four or more sessions over 12 months was 14 sessions. Over the next 12 months, we recommend you consider the following:

#### **Weight Loss:**

- Strongly encourage participants to record food intake (type, caloric, fat calories, etc.).
- Emphasize the proven relationship between documentation of food consumption and weight loss.
- Request that participants who are achieving their weight loss goals share their experiences with the larger group, with particular focus on troubleshooting and overcoming challenges.
- Devote extra time to the exploration of challenges that participants are encountering. In addition to input from the lifestyle coach, emphasize learning and problem-solving.

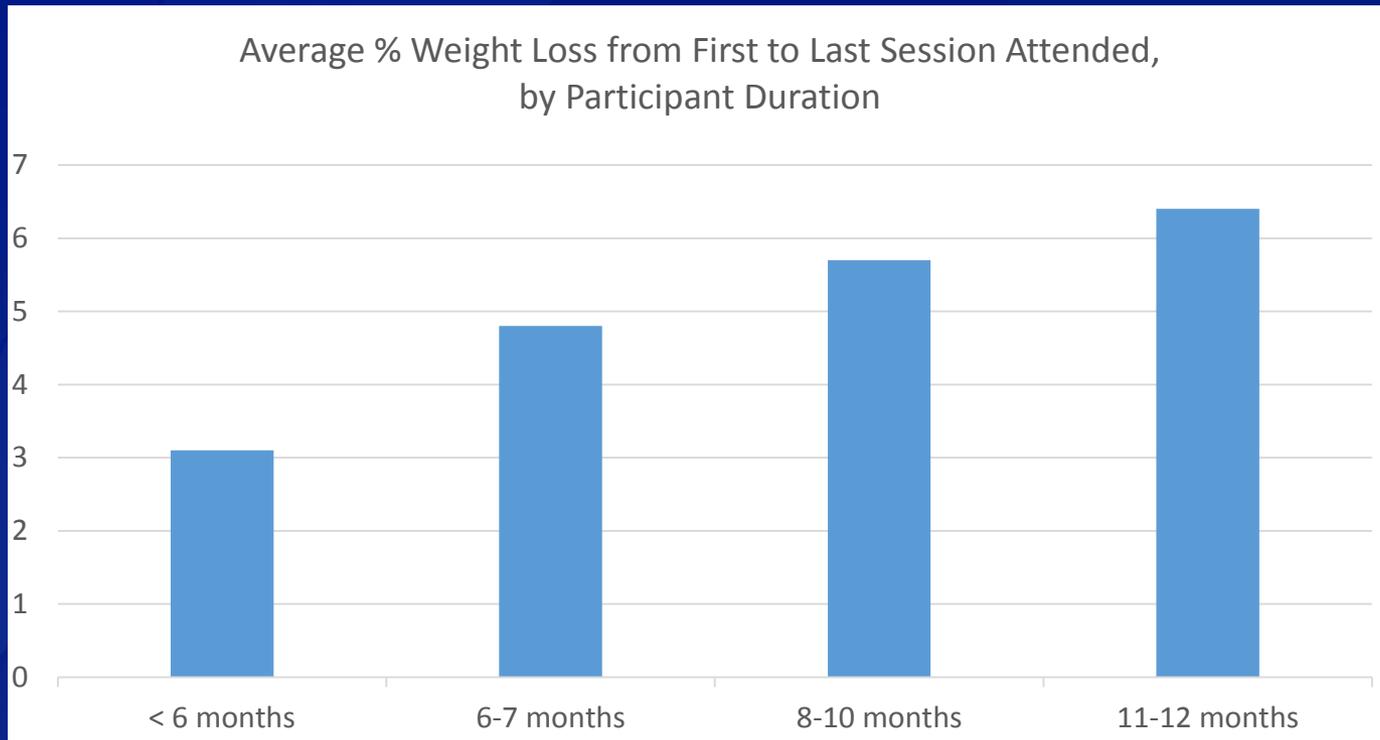
# **Intervention Duration and Intensity**

# Intervention Duration: It Matters!

- **12 MONTH INTERVENTION**
  - ✓ 16 weekly sessions in the first 6 months and 6 monthly sessions in months 7-12 (22 sessions, minimum)
  - ✓ Offering 22 sessions more often does not equal 12 month duration
  
- **ORGANIZATIONS THAT OFFER A FULL 12 MONTH INTERVENTION:**
  - ✓ Are more likely to achieve full recognition
    - Especially with better retention/participation
  - ✓ See enhanced participant outcomes

# Intervention Duration

Average % Weight Loss from First to Last Session

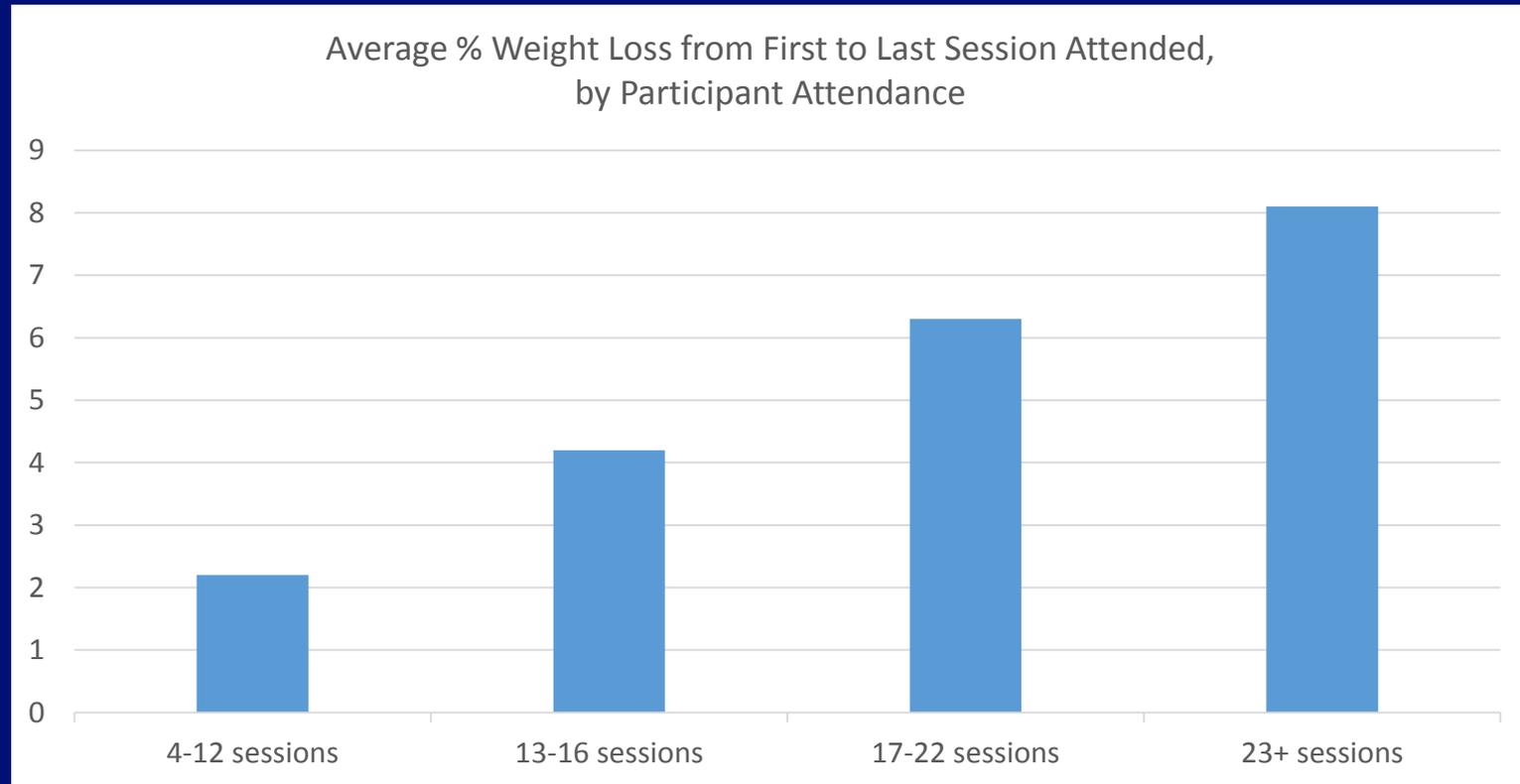


# Intervention Intensity: It Matters!

- **SESSIONS OFFERED**
  - ✓ Positive relationship between sessions offered and participant retention
- **MINIMUM SESSIONS OFFERED DOES NOT MEAN THE ORGANIZATION HAS MET THE INTENSITY REQUIREMENT**
  - ✓ Minimum of 16 sessions, delivered approximately once per week during months 1-6
  - ✓ Minimum of 6 sessions, delivered approximately once per month during months 7-12
- **ORGANIZATIONS THAT OFFER MORE THAN 22 SESSIONS:**
  - ✓ Are more likely to achieve full recognition
    - Especially with better retention/participation
  - ✓ See enhanced participant outcomes

# Intervention Intensity

Average % Weight Loss from First to Last Session



# Strategies for Success

# Session Attendance

- **EMPHASIZE THAT THE PROGRAM IS 12 MONTHS, AND THAT PARTICIPANTS MUST ATTEND SESSIONS DURING MONTHS 7-12**
- **CONSIDER INCORPORATING WRITTEN PARTICIPANT AGREEMENTS TO MAINTAIN ATTENDANCE THROUGHOUT THE 12 MONTH PROGRAM**
- **CONSIDER INCREASING THE NUMBER OF SESSIONS OFFERED**
  - ✓ Frequency and number of sessions attended builds trust and commitment among participants
  - ✓ Consider offering biweekly sessions in months 6-7 for an easier transition to monthly sessions
  - ✓ Programs that offer more than one session per month during months 7-12 report higher session attendance

# Program Eligibility Requirement

- **MINIMUM OF 50% OF PARTICIPANTS MUST BE ELIGIBLE FOR THE PROGRAM BASED ON A RECENT (WITHIN THE LAST YEAR) BLOOD TEST OR HISTORY OF GESTATIONAL DIABETES MELLITUS (GDM)**
- **50% OF PARTICIPANTS MAY BE ELIGIBLE FOR THE PROGRAM BASED ON A RISK TEST**
  - ✓ Participants entering the program solely on the basis of a positive risk test score are encouraged to follow up with their healthcare provider
- **OUTREACH EFFORTS TO THE CLINICAL COMMUNITY ARE ENCOURAGED TO FACILITATE PROGRAM AWARENESS AND INCREASED REFERRALS**
- **CONSIDER COLLABORATION WITH THE HEALTH DEPARTMENT IN YOUR STATE FOR TECHNICAL ASSISTANCE WITH CLINICAL OUTREACH**

# Documentation of Body Weight

- **DOCUMENTATION OF BODY WEIGHT FOR ALL PARTICIPANTS AT ALL SESSIONS IS REQUIRED**
- **STRESS TO PARTICIPANTS THE PROVEN RELATIONSHIP BETWEEN TRACKING OF BODY WEIGHT LEADING TO ACHIEVEMENT AND MAINTENANCE OF WEIGHT LOSS**
- **REVIEW LOGISTICS TO ENSURE SESSION WEIGH-INS ARE PERFORMED IN A PRIVATE AND IN A CONFIDENTIAL AREA, OR THAT A BLUE-TOOTH ENABLED SCALE IS USED IN VIRTUAL PROGRAMS**
- **IF PARTICIPANTS DO NOT WISH TO BE WEIGHED IN FRONT OF LIFESTYLE COACHES, THEY CAN WEIGH AT HOME AND REPORT THEIR WEIGHT AT THE BEGINNING OF EACH CLASS**

# Documentation of Physical Activity Minutes

- **CHECK PARTICIPANT PHYSICAL ACTIVITY LOGS TO ASSESS THE ACTUAL NUMBER OF WEEKLY PHYSICAL ACTIVITY MINUTES BEING RECORDED**
  - ✓ 150 minutes of moderate physical activity per week is recommended
  - ✓ Should emphasize the importance of tracking minutes through the entire 12 month program
- **THE CODE 999 SHOULD BE USED PRIMARILY IN PLACE OF ACTUAL PHYSICAL ACTIVITY MINUTES FOR THE FIRST FEW SESSIONS, BEFORE THE CONCEPT OF PHYSICAL ACTIVITY IS INTRODUCED. AFTER THAT, 0 SHOULD BE ENTERED TO INDICATE THAT NO ACTIVITY WAS PERFORMED DURING THE PREVIOUS WEEK.**
- **STRESS TO PARTICIPANTS THERE IS EVIDENCE THAT INDICATES A POSITIVE RELATIONSHIP BETWEEN DOCUMENTATION AND SUCCESS IN MEETING PHYSICAL ACTIVITY AND WEIGHT LOSS GOALS**

# Monitoring Data

- **USE YOUR DATA TO:**
  - ✓ Identify specific participants that may be reporting significant challenges
  - ✓ Monitor outcomes to better understand progress on meeting the requirements
  - ✓ Modify program implementation as needed to improve outcomes
- **MONITOR AND EVALUATE PARTICIPANT DATA ON A CONTINUOUS BASIS BETWEEN NOW AND YOUR NEXT DATA SUBMISSION**
- **REFER TO “APPENDIX F: EXAMPLE OF USING DATA FOR EVALUATION” IN THE DPRP STANDARDS AND OPERATING PROCEDURES AS A GUIDE TO ANALYZING YOUR DATA**

# **DPRP Technical Assistance**

# DPRP Technical Assistance

- ✓ The DPRP Team is available to answer questions submitted to [dprpAsk@cdc.gov](mailto:dprpAsk@cdc.gov)
- ✓ Individual outreach, as needed, is available to DPRP delivery organizations through [dprpAsk@cdc.gov](mailto:dprpAsk@cdc.gov)
- ✓ Scheduled webinars for DPRP delivery organizations are offered routinely
- ✓ Technical assistance is provided through a Summary and Recommendations section in each evaluation report
- ✓ Individual outreach, 2 attempts, is made to every organization offering a technical assistance call to review their annual report

# Adding or Changing Contact Information

## ❑ REQUIRED INFORMATION :

\* Last Name:

\* First Name:

Middle Initial:

\* Title:

Salutation:

Academic Credential:

\* Email:

\* Phone: ( ) - ext.:

Fax: ( ) -

**Note: Fields marked with '\*' are mandatory.**

# Q & A

# Thank you for participating in the Diabetes Prevention Recognition Program (DPRP)

**We are here to help!**  
**Please submit questions to [dprpAsk@cdc.gov](mailto:dprpAsk@cdc.gov)**

**For more information please contact Centers for Disease Control and Prevention**

1600 Clifton Road NE, Atlanta, GA 30333  
Telephone, 1-800-CDC-INFO (232-4636)/TTY: 1-888-232-6348  
E-mail: [cdcinfo@cdc.gov](mailto:cdcinfo@cdc.gov) Web: [www.cdc.gov](http://www.cdc.gov)

The findings and conclusions in this report are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.

