

SSEP Update

(Sweet Success Extension Program)



Spring 2018
Vol 13 No 2

SSEP

SSEP, A Nonprofit Corp. PO Box 7447, Chico, CA 95927
Phone 800.732.2387 ssep1@verizon.net www.sweetsuccessesexpress.org



Sweet Success Express: Prevention - Return on Investment Annual Research Conference - November 8-10, 2018



The exciting and innovative program will focus on how to invest in preventive management strategies to provide positive returns on diabetes and reproductive health. While this event will provide a comprehensive update and review of current practice standards, the major focus will be on evidence-based research studies that show positive outcomes for investing in preventive strategies. National and international speakers will provide practical and relevant therapies and management strategies as well as evidence-based preventive interventions to improve outcomes. The focus will be to assist clinicians to provide quality patient care to meet today's needs for change. Both clinical guidelines as well as specialty topics based on current research will be presented to assist in demystifying the controversies surrounding management strategies. Concepts of prevention, intervention, self-management education, team management and treatment modalities for current clinical applications will be integrated into the program. The goal is to provide the highest quality diabetes and reproductive health management that can improve returns on investing in prevention.

Continuing Education: 19.75 CE approved - Applied to CDR for Prior Approval for CPE.

Faculty Includes: Charron-Prochownik, Charron, PHD, RN, CPNP; Coustan, Donald, MD; Dopart, Susan, MS, RD, CDE; Farabi, Sara PhD RN; Gunderson, Erica, PhD, MS, MPH; Hernandez, Teri, PhD RN; Jornsay, Donna, RN, MS, BSN, CPNP, CDE; Lynn, Jessica CMN, CDE; Miller, Elizabeth, RN, BSN, MS, CDE; Rao, Geetha, MS, RD, CDE, CDTC, CPT, CLE; Sperling, Jeffrey MD.

Scientific Symposia: **POSTER PRESENTATIONS** Original investigations, with Oral Discussion of research topics within conference
TO SUBMIT ABSTRACT Contact ssep1@verizon.net for info.

NOTE: See article on Speaker JESSICA LYNN, CNM, CDE, on page 4

Who will Attend?: SSEP Conferences will benefit those who provide team care based on proven research. The demographic of the attendees will be broad and extend to all specialty areas of the diabetes and reproductive health. To Download Brochure, Register and Make Hotel Reservations, Visit: www.sweetsuccessesexpress.org/conference.html



Prerinal Diabetes: Opportunities for Prevention and Care SSEP Associate Training & Specialty Conference NYC Area - October 12-13, 2018



This conference is co-sponsored by New York University, and designed to provide a comprehensive update and review of current practice standards and contemporary topics related to diabetes and reproductive health. This is especially challenging today, as a national consensus on the approach to both diagnosis of diabetes in pregnancy, and optimal treatment regimens does not exist. The program will utilize a creative and practical application of evidence-based management strategies with the recognition of alternative approaches. The focus will be to assist clinicians to provide quality patient care to meet today's needs for change. Both clinical guidelines as well as specialty topics based on current research will be presented to assist in demystifying the controversies surrounding management strategies. National and international speakers will provide practical and relevant therapies and management strategies as well evidence-based preventive interventions across the life stages. Concepts of prevention, intervention, self-management education, team management and treatment modalities for current clinical applications will be integrated into the program. The goal is to provide the highest quality diabetes and reproductive health management.

Complete information will soon be available at
www.sweetsuccessesexpress.org/conference.html
Or email ssep1@verizon.net for more information

SSEP Update GOAL is to publish useful information and/or tools to help team members provide quality diabetes and pregnancy care.

SSEP Mission: Our mission is to improve pregnancy outcomes and long-term quality of life for women with diabetes and their offspring, which extends beyond birth for both mother and child. We work with provider groups to increase their knowledge and delivery of care by:

- Developing and/or endorsing events and activities that increase their knowledge.
- Supporting multidisciplinary health care teams as they take a proactive approach, focused on healthy lifestyles.
- Encouraging providers to involve the entire health care system, community and patient at all levels in supporting lifestyle changes that foster improved long-term health and quality of life.

SSEP Contact Information

www.SweetSuccessExpress.org
cindy@proedcenter.com - ssep1@verizon.net - ssep9@aol.com

Upcoming Conferences

Sweet Success Express & SSEP Associate Training & Specialty Seminar in New York City, Oct. 12-13, 2018

Sweet Success Express 2018: Prevention: Return on Investment, Embassy Suites Anaheim South, CA, November 8-10, 2018

SSEP Board of Directors 2016 - 2018

Cindy Parke, RNC, CNM, MSN (CA)	President
Gladys (Sandy) Ramos, MD	Vice-President
Julie Daley, RN, MS, CDE (RI)	Co-Secretary
Tina Jones, MS, RD, CDE (OR)	Co-Secretary
M. Joann Henry, RNC, MSHS	Treasurer
Liz Miller, RN, BSN, MS, CDE (TX)	RN Consultant
Katherine O'Connell, MN, RN (WA)	RN Consultant
Ramona Patterson, BSN, RN, CBC	RN Consultant
Geetha Rao, MS, RD, CDE (CA)	RD Consultant

Advisory Council

Julie Daley, RN, MS, CDE	RI
Richard Fox, Business Sector	CA
M. Joann Henry, RNC, MSHS	CA
Teri Hernandez, PhD, RN	CO
Christina Inteso, Pharm. D	IN
Maribeth Inturrisi, RN, MS, CNS, CDE	CA
Lisa Jim, RN	AZ
Siri Kjos, MD	CA
Jessica Lynn, CNM, CDE	NY
Tina Jones, MS, RD, CDE	OR
Donna Jornsay, MS, BSN, CPNP, CDE, BC-ADM	CA
Liz Miller, RN, BSN, MS, CDE	TX
Katherine O'Connell, MN, RN	WA
Cindy Parke, BSN, CNM, MSN	CA
Ramona Patterson, BSN, RN, CBC	AZ
Joan Perez, MBA, BSN, CDE	CA
Diane Phillips, RD	AZ
Lynne Raphael, MMSc, RD, CDE	GA
Gladys (Sandy) Ramos, MD	CA
Geetha Rao, MS, RD, CDE	CA
Doris Roberts, RN, BSN, PHN	CA
David Sacks, MD	CA
Sandy Sinnes, RN, BSN, CDE	WA
Alyce Thomas, RD	NJ
Shelley Thorkelson, MSN, RN CNM, CDE	NM

SSEP Mailing Address/Phone: PO Box 7447, Chico CA 95927-7447 - Phone: 800.732.2387

Patient-centered care: What is it?

By Harsimran Singh, PhD

Nowadays, it is not uncommon to find terms like 'patient-centered care' and 'individualized care' used in the context of any and all aspects of healthcare. In fact, they are so frequently used that we run the risk of becoming numb to the true meaning of these words and evaluating whether or not our services are truly patient-centered. In my experience, the problem of managing diabetes in the context of pregnancy presents an exciting and a uniquely rewarding challenge for providers. It also perfectly lends itself to evaluating whether demands and expectations linked to patient-centered care are being met.

What does it mean? The term 'patient-centered care' was first coined in early 1990s as part of the research conducted by the Picker Institute (Through the Patient's Eyes, 1993). Harvey Picker, the founder, defined it as "understanding and respecting patients' values, preferences and expressed needs...". A decade later (2001), the Institute of Medicine defined it as "providing care that is respectful of and responsive to individual patient preferences, needs and values, and ensuring that patient values guide all clinical decisions".

What does patient-centered care include? The literature highlights eight dimensions of patient-centered care that we can use as a guiding tool to keep our patients front and center during our management efforts and consistently evaluate our services in terms of providing optimal individualized care.

1. Respect for patients' values, preferences, and expressed needs: Examples – How do patients' ethnicities and religious backgrounds affect their diabetes management? Are there any culturally-specific concerns, barriers, or facilitators that affect patients' diabetes management? What are patients' preferences in terms of diabetes management and any self-care regimen?
2. Coordination and Integration of Care: Examples – Are all providers communicating effectively with each other in order to provide best possibilities for patients? Do patients understand how different providers are communicating with each other regarding their care?
3. Information and education: Examples – Do patients fully understand their diabetes-related diagnosis? Do patients feel able to manage their diabetes effectively? Do your lifestyle and other self-care recommendations align with patients' belief and value systems?
4. Physical comfort: Examples – Are patients comfortable attending their consultations with you? Is their

physical privacy respected during consultations? Are patients with special needs assisted and engaged effectively?

5. Emotional Support and Alleviation of Fear and Anxiety: Examples – Are you addressing patient's psychosocial needs in terms of their diabetes management? Is diabetes management significantly impacting patients' financial status and if so, are you assisting them to connect with appropriate resources to help address the situation?
6. Involvement of family and friends: Examples – What type of support system do patients have in order to manage their diabetes effectively? Is there a need to involve patients' family/friends in their diabetes self-care?
7. Continuity and transition: Examples – Do patients understand their medication regimen/dietary plan and how to integrate it in their lifestyle? Do patients understand the frequency of their medical appointments and how to stay connected with their healthcare team for emergency purposes?
8. Access to care: Examples - Can patients easily access your clinic/service? Are specialty services available and do patients understand how to access them? Are there any specific language needs for patients that interfere with their ability to access care optimally?

Hence, contrary to common belief, 'patient-centered care' encompasses more than just focusing on patients' values and preferences. It is quite a loaded term that involves various patient-related aspects that need to be acknowledged and addressed in order to deliver services that are truly patient-centered. Your services may not be addressing all these key points at the moment; however, it is good practice to evaluate your care delivery against this yardstick from time to time to identify areas that need to be strengthened and others that are progressing well. In the words of the pioneering physician, Hunter Doherty "Patch" Adam, "you treat a disease, you win, you lose. You treat a person, I guarantee you, you'll win, no matter what the outcome".

**Support SSEP by using
www.smileamazon.com**

**Just do your normal shopping starting at
www.smileamazon.com - click on supporting (under
the search bar) and choose SSEP.**

Amazon donates 0.05% of purchase to SSEP!

Caring for Diabetes in Pregnancy



Jessica Lynn, CNM, CDE

When NYC Health + Hospitals/Woodhull Nurse Midwife Jessica Lynn tells a pregnant patient that she has gestational diabetes, the expectant mother is often frightened, disappointed, and confused.

But Lynn, widely known as the diabetes midwife, says the diagnosis should not be seen solely as a risk or complication. Instead, she offers hope, presenting diabetes as an opportunity for healthy change that helps mother and baby.

At Woodhull, Lynn is part of a specialized team of doctors, nurses, and dietitians that work at the Diabetes-in-Pregnancy clinic which cares for about 200 women every year.

"Pregnancy is a huge motivator," Lynn said. "We have to harness that and help women see that small changes in diet and exercise can make a big difference."

Lynn's passion for helping women with diabetes in pregnancy stems from her own experience, living with Type 1 diabetes. After becoming a mother, she realized the need for diabetes care in obstetrics and became a Certified Diabetes Educator (CDE).

Three years ago, she teamed with Dr. Rebecca Shiffman, Registered Dietitian Angelina Iffraimova, and members of Woodhull's nursing and social work staff to start the diabetes pregnancy clinic. In the U.S., more than 10 percent of pregnancies are affected by diabetes. But, Lynn estimates, those rates are higher in the communities served by public hospitals due to inadequate access to education and healthy foods.

To help staff caring for women with diabetes at other public hospitals, Lynn wrote the NYC Health + Hospitals' Perinatal Diabetes Guidelines. She also speaks at other hospitals in New York and across the nation at clinical practices, universities and conferences. Presently, she is organizing a perinatal diabetes conference with NYU Langone Health in October.

For her dedication to diabetes education and prevention, Lynn was recently honored by Brooklyn Borough President Eric Adams as a "Health Hero."

HERE ARE 7 TIPS ON CARING FOR PREGNANT WOMEN WITH DIABETES:

1. All health care providers need diabetes education. Diabetes and prediabetes affect almost half of the US population. So it is no longer solely a disease for endocrinologists and primary care providers. Pregnancy is often the first healthcare access point for women. To create change, diabetes knowledge is needed in obstetrics.
2. High blood glucose is the culprit, not diabetes. High blood glucose causes miscarriage, excessive fetal growth, birth trauma, increased C-section rates, and even fetal death. Tell women it's not the diabetes diagnosis, but the high blood glucose that causes harm. With help, she will be able to manage her blood glucose and reduce risks to her and her baby.
3. Women need individualized and culturally specific care. First line therapy for diabetes is lifestyle change. It's important to get to know your patient. Does she work at night? Does she eat pizza and soda or tacos and rice? Consider helping her tailor her life, instead of overhauling it.
4. Every visit is a preconception visit. Healthcare providers should have preconception discussions with women of childbearing age. Ask women at every visit 'Would you like to become pregnant in the next year?' If the answer is yes, provide preconception care with diabetes education.
5. Discuss goals with women. Pregnant women are extremely goal oriented. Discuss targets for blood glucose, HbA1c, and weight at every visit. Consider giving women their HbA1c history in writing so they can be involved and proud when they meet their goals.
6. Explain to patients that gestational diabetes does not disappear at birth. This myth of its disappearance is pervasive and potentially injurious. Tell women that gestational diabetes often leads to type 2 diabetes. But, healthy changes in diet, weight loss, exercise, and breastfeeding can help prevent or delay diabetes in the future.
7. Believe in the ripple effect. Think of women as central to the health of their families and communities. Talk about reducing or eliminating juice and soda. Encourage more physical activity, stress reduction and adequate sleep. Women can and will alter the lifestyles of their children and beyond. They are central to the powerful ripple effect for change we need to see in diabetes.

Story published courtesy of NYC Health + Hospitals

NOTE: Jessica Lynn, CNM, CDE, will be a speaker at two upcoming events: 1) In collaboration with NYU, SSEP will present a 2 day conference in NYC on Oct. 12-13, 2018; & 2) the SSE Annual Research Conference in CA held on Nov. 8-10, 2018. (see page 1)

Reflections by the SSEP CEO

Cindy Parke, RNC, CNM, MSN

My thoughts this spring, first, wow is time going fast, it is nearly Memorial Day 2018! I hope that all of you get a bit of relaxation in the coming summer months. The spring has been very busy, as we have expanded the educational events within SSEP, with new product updates, and beyond with new national seminars. The April Denver conference, Perinatal Diabetes: Prevention and Care Takes a Team, was nicely attended and we had such a wonderful site on the Colorado University campus. The research group at CU is doing amazing things, and I would like to thank Teri Hernandez and Lynn Barbour (present in spirit) for their leadership and support in this event. In addition, I and SSEP Board of Director member, Liz Miller, brought Diabetes in Pregnancy education on board the OB Nurses Cruise and Learn adventure April 28-May 5. Getting the information out to all who care for women is essential to our mission. We met not only a diverse set of nurses on the cruise, but others from the United States and around the world. The topics of maternal care and diabetes awareness started lively conversations outside of the classroom as well!

The SSEP team, with Joann's guidance, is working hard on both the New York City training conference, Perinatal Diabetes: Opportunities for Prevention and Care, for October 12-13 as well as the November 8-10 Diabetes in Pregnancy Research Conference, Prevention - Return on Investment, to be held at the Embassy Suite Anaheim South (the brochure and registration are available now through the website). We are so grateful to all the fine speakers who answer our request to join us and share their expertise.

Sunday was Mother's Day, I reflect on my own mother, and motherhood but also recognize how important our work is so that all mothers can enjoy this special day with greater health for themselves and their children. So many blessings, I hope you took the time to recognize and celebrate yours, even when there has been loss one needs to reflect on the blessings you have.



NOW AVAILABLE

Sweet Success Food Guides

**Patient hand out - color coded pictorial food groups
Personalized meal plan for meals and snacks
Easy for patient teaching & use - in English & Spanish**

**\$1/each - minimum order \$25 / \$5 S&H
www.sweetsuccessesexpress.org/products.html**

Links and Resources

Use of Codeine and Tramadol during Pregnancy

There have been reported incidents of pregnant patients being prescribed codeine for pain control. While there is no specific guidance to avoid codeine in pregnant women, a pregnant woman can become a breastfeeding mother and Codeine can cross into the breastmilk. The FDA and ACOG's recommendations are to avoid codeine for breastfeeding women due to risk of overdose in the neonate. This warning also includes Tramadol. Links to the FDA and ACOG websites are below.

<https://www.fda.gov/Drugs/DrugSafety/ucm549679.htm>

<https://www.acog.org/Clinical-Guidance-and-Publications/Practice-Advisories/Practice-Advisory-on-Codeine-and-Tramadol-for-Breastfeeding-Women>

Type 1 Patient Handbook for Download

JDRF has a diabetes and pregnancy patient handbook for women with type 1 Diabetes that can be downloaded by professionals or patients. A link has been placed on the SSEP website at www.sweetsuccessesexpress.org on the Resource page.

It can also be accessed directly on the JDRF Resources page. The direct link is <http://type1onemation.org/resources/newly-diagnosed/t1d-toolkits/>.

Benefits of SSEP MEMBERSHIP

- ✍️ FREE education product each year (\$25.00+ value)
 - ✍️ Quarterly Newsletter
- ✍️ Online/phone standard of care consults
 - ✍️ Conference registration discounts
- ✍️ Discounts on SSEP education materials
 - ✍️ Monthly email updates
- ✍️ Name entered in Summer Member Drawing (Prizes include free conference registrations, cash & gift certificates)
 - ✍️ Personalized membership card
- ✍️ Membership fee tax deductible to the extent of the law
 - ✍️ Membership fee supports member services

Individual Membership - 1 person

Organizational Membership - 3 people - same facility

LIMITED SPECIAL OFFER 1

**GDM Patient Handbooks (1601 Eng-1602 Sp)
Type 2 Patient Handbooks (1603 Eng-1604 Sp)**

**50 - 200 - \$2.50/ea - Mix & Match
(More info on order form on page 3)**

**Special offers may be ordered online, by mail, by emailing
ssep1@verizon or calling 800.732.2387 &
mention "SS Pt Handbook Offer 1"**

Valid through 08/31/2018

**SSEP, PO Box 7447, Chico, CA 95927,
ssep1@verizon.net or Ph 800-732-2387**

LIMITED SPECIAL OFFER 2

Individual/Organizational Membership

Save 10% off regular Fee

\$50 for Individual Member (Reg \$55)

\$112 for Organizational Members - 3 staff - same facility (Reg \$125)

See more info on Order Form - page 3

**Special offers may be ordered online, by mail, by emailing
ssep1@verizon or calling 800.732.2387 &
mention "Special Offer 2 - Membership"**

Valid through 08/31/2018

SSEP, PO Box 7447, Chico, CA 95927,