

**The New Mexico
Diabetes Advisory Council
June 1, 2007
Minutes**

1. Welcome and Introductions – Yvonne Peperzak-Blake

Approval of Minutes as reported for the meeting held February 23, 2006.

2. DPCP Update – Judith Gabriele, Program Manager DPCP

- **Funding:** In response to our new funding application process, we received more than 40 applications and funded 11 organizations in high priority areas, increasing our support for primary prevention, foot and vision exams, and other disease management services in underserved populations.
- **Staffing:** We have a new nurse on staff, Pam Kovach, and are on the brink of hiring an epidemiologist and evaluator. At the September meeting you'll have an opportunity to meet the additional staff.
- **Other Resources:** A new brochure about diabetes self care has just been produced by the DOH Bureau of Health Emergency Management. This is available from the DPCP program. Also, the DPCP has applied for a small amount of funding from the National Association of Chronic Disease Directors' Women's Health Council to address women, diabetes, and depression.

3. Core Council Update – Yvonne Peperzak-Blake

- The DAC is now a 501c3 non-profit organization.
- The DAC Core Council is having a retreat on June 22 to build teamwork and leadership and to help the core council serve DAC members and achieve the goals of the statewide strategic plan.

4. Sharing Wisdom - Diabetes Prevention Lifestyle Program

Carla Herman, MD, MPH, Division of Geriatrics

Venita Wolfe, BS, Division of Epidemiology

UNM Department of Internal Medicine

This research study tested a lifestyles intervention to see if it was helpful to women in reducing risks for type 2 diabetes. Two hundred Native American women aged 18-40 living in the Albuquerque area volunteered for the program. Dr. Carla Herman and Ms. Venita Wolfe described details of the project and offered to send a copy of the study to anyone who was interested. Slides of the presentation are available on the DAC web page at

<http://www.diabetesnm.org/programs/dac.htm>.

5. Diabetes and Depression: an Interactive Program

Sue Anne Gradisar, Ed.D., Nicole Bunselmeyer, MediaDesigns Inc.

Sue and Nicole gave some background information about the interactive course on Diabetes and Depression that they have been developing with the DPCP and subject matter experts (on the CEU panel below). They talked about the current status of online courses that can be taken for credit by medical professionals as a growing trend. They then discussed the whole process of designing and developing this type of course, and specifically all the people involved. They also showed excerpts from the sections of the program that have been created to give users a preview of what is to come. They plan to complete the course later this fall and it will be available online very soon thereafter. DAC members were also asked to fill out a form with their reactions to the program so that it can be improved.

6. CEU panel: Diabetes and Depression

Susan Perry, PhD, CDE – Behavioral Specialist, El Centro Family Health NM (moderator)

Mark Bjorklund, MD – Medical Director, El Centro Family Health NM

Joseph Neidhardt, MD – Psychiatrist, private practice, Santa Fe NM

Mario Pacheco, MD – Residency Director, St. Vincent's Hospital, Santa Fe NM

Mary Roessel, MD – Psychiatrist, Indian Hospital, Santa Fe NM

The moderator asked each panelist to address the following questions:

- Describe how a physician might collaborate with a behavioral health counselor or psychiatrist to treat patients with depression. Give an example from your experience.
- What are the barriers to providing a behavioral health evaluation for patients of concern in a typical medical setting? How difficult is it to get counseling support for patients struggling with behavioral health issues? Are there barriers to getting that support in a timely manner?
- What systems or strategies do you use to prescribe psychiatric medications for patients in your practice? How important is it to track those medications and their effects on your patient, and how do you track them?
- How do the role of resources (medication and counseling services) and case management affect environmental and situational causes of depression? Give an example when poor access to treatment resources had a negative effect on patient outcome.

Each panelist was given a few minutes for a summary statement and the discussion was then open to the floor.

The next DAC Meeting will be on Sept. 7, 2007, 9-1 at the Sandia Resort.