

Why do we need a Diabetes Clinic?

- Diabetic emergencies require rapid responses
- People with diabetes can often self-manage emergencies IF they have the proper tools.
- Diabetes treatment is highly specialized and rapidly changing. This requires specialized healthcare providers who are current in practice.
- Treatment for diabetic emergencies can often be provided in the shelter or shelter clinic, thus lessening impact on the community emergency health system. In addition, this will save money & resources for the evacuation response community.

Source: Maryanne Kridner, August, 2006

Disease and Case Management

www.cdc.gov/diabetes/projects/community.htm

The Task Force on Community Preventive Services is a 15-member non-Federal Task force supported by the Centers for Disease Control and Prevention (CDC). CDC scientists review the effectiveness of health care interventions for the Task Force that then makes recommendations to the public health community and health care delivery organizations.

The recommendations generated by the Task Force are combined to form the *Guide to Community Preventive Services*, which includes a section on diabetes. To improve the health of people with diabetes, the Task Force reviewed the evidence of the effectiveness of diabetes disease and case management and self-management education.

The Task Force **strongly recommends** the following:

Disease management

- identify everyone with diagnosed diabetes in the community or health care delivery organization
- implement care plans proven to be effective
- track, measure, and manage health outcomes

Disease management improves

- glycemic control (blood sugar levels)
- screening rates for diabetic retinopathy (eye disease); foot lesions and nerve damage; and protein in the urine (a sign of possible kidney damage)
- physician monitoring rates for glycemic control and cholesterol levels

Case management

- assign a case manager to plan, coordinate, and integrate care for people with diabetes

Case management improves

- glycemic control (blood sugar levels)
- physician monitoring rates for glycemic control

Self-Management education

The Task Force **recommends** the following:

Diabetes self-management education in community gathering places

- for adults with type 2 diabetes
- provides diabetes educational information in community centers, libraries, and places of worship
- improves glycemic control (blood sugar levels)

Diabetes self-management education in the home

- educates children and adolescents with type 1 diabetes

- improves glycemic control (blood sugar levels)

Related publications

Details of this review were published in CDC's *Morbidity and Mortality Weekly Reports / Recommendations and Reviews (MMWR/RR)* on September 28, 2001. The article briefly describes how the reviews were conducted, the effects on other outcomes, and other information. The *MMWR/RR* is available on-line from CDC at <http://www.cdc.gov/MMWR> or from the Task Force at <http://www.thecommunityguide.org>.*

A full report on the findings of the Task Force on diabetes, including a comprehensive evidence review, was published in a special supplement to the *American Journal of Preventive Medicine* 2002;22(1). This supplement also includes a review of physical activity interventions. To see the reports, visit the *[Guide to Community Preventive Services](#) and select Diabetes, Physical Activity, and Commentaries: A summary statement with links to articles.

Task Force on Community Preventive Services. [Diabetes Recommendations for healthcare system and self-management education interventions to reduce morbidity and mortality from diabetes](#). *Am J Prev Med* 2002 May; 22(4 Suppl):10-14.

Norris SL, Nichols PJ, Caspersen CJ, Task Force on Community Preventive Services, et al. [The effectiveness of disease and case management for people with diabetes: a systematic review](#). *Am J Prev Med*. 2002 May;22(4 Suppl):15-38.

Norris SL, Nichols PJ, Caspersen CJ, Task Force on Community Preventive Services, et al. [Increasing diabetes self-management education in community settings: a systematic review](#). *Am J Prev Med*. 2002 May;22(4 Suppl):39-66.

For more information

For more information on the diabetes chapter, call toll-free 1-800-CDC-INFO or 1-888-232-6348 TTY or E-mail cdcinfo@cdc.gov. On the Internet, you can visit *[Guide to Community Preventive Services](#).

* Links to non-Federal organizations are provided solely as a service to our users. Links do not constitute an endorsement of any organization by CDC or the Federal Government, and none should be inferred. The CDC is not responsible for the content of the individual organization Web pages found at this link.

Diabetes Self-Management During Natural & National Emergencies

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Learning Objectives

1. Discuss clients' w/DM needs during natural/national emergencies.
2. List planning to assure clients' preparation to manage DM in emergencies.
3. State advocacy actions to assist local emergency planning committees.

Problem

- Many people w/DM must flee homes at moments notice
- During Hurricanes Katrina & Rita, hundreds of thousands of evacuees
- ~50% evacuated to San Antonio had DM & no useable self-management supplies

San Antonio's Emergency Resources

- American Red Cross
- San Antonio Metro Health
- Texas Medical Rangers
- Life-Science Colleges/Universities
- Firemen Paramedics
- Ready South Texas
- Ambulance Teams
- Health Professional Societies
- Military health care support

No Pre-established Clinics

- Create emergency shelters & clinics
 - Kelly USA
 - Old Levi-Strauss Factory
 - Windsor Park Mall
- Alamo Association of Diabetes Educators
 - Diabetes Clinic @ Kelly USA
- Req'd. establishing new connections for support

Essential Supplies

- Fax Machine & Cellular Telephone
- Refrigerators for medications
- Medications
- Blood glucose meters & lancets
- Sharps containers
- Sphygmomanometers & Stethoscopes
- Wound care supplies, disposable gloves
- Sharps containers, alcohol wipes, hand sanitizer
- Canes, walkers, crutches, oxygen & accessories
- SHOES!!

Collaborations

- Internists, Psychiatrists, Peds, GPs, NPs, PAs
- Pharmacists
- Podiatrists
- Dentists

- Social Workers
- Hospitals

Process

- Coordinated response & develop infrastructure took days – unprepared
- When refrs. arrived, 3 arrived
- Drug & supply companies very supportive
- Prescriptions went to wrong places initially
 - Set up Walgreen's & CVS pharmacists onsite to process orders by computer
 - Need to deliver prescriptions
 - Evacuees left w/o notifying those in charge

Outcomes

- Evacuees medical & physical needs met
- Medications recd. & stored at proper temp.
- Glucose monitoring provided
- On-time meals provided
- Referrals for diabetic shoes/prostheses
- Ambulation assistive devices provided
- Suitable personal space & hygiene

Lessons Learned

- Pre-existing relationships w/needed services
- Participants change – Need to remain flexible
- May need to take on unusual duties
- Verify credentials of volunteers
- Maintain roster of evacuees' locations
- Need to coordinate shift coverages – 24-hrs.

“Katrina will likely be recorded as the worst natural disaster in the history of the United States.”

— U.S. National Hurricane Center

<http://www.nnvl.noaa.gov/hurseas2005/Katrina1345z-050829-1kg12.jpg>

Promoting Self-Management in an Evacuation Shelter:

The Diabetes Clinic

Beginning the Process

Why do we need a Diabetes Clinic in an Evacuation Shelter?

Diabetic emergencies require rapid response

Disaster

Evacuees begin to Arrive in San Antonio

Taking Action - Chapter Disaster Response Committee

Organizational Chart

The Tools

- FDA Tools
- CDC Tools
- NIH Tools
- NIDDK Tools
- FEMA
- JDRF
- ADA
- AADE
- Communication Tools
- Legal Tools
- State/Community Tools
- Forms and Charts

FDA Tools Example

Insulin Storage and Switching Between Products by Victims of Hurricane Katrina

<http://www.fda.gov/cder/emergency/insulin.htm>

CDC Tools Example

Hurricane-Related Information for Health Care Professionals

- DIABETES: Recommendations for Persons Undergoing Blood Glucose Monitoring in Evacuation Centers...
- Guide to Community Preventive Services For Disease/Case Management

NIH Tools: Medical Consultation Line

KatrinaHealth.org was an online service that was established to help individuals affected by Hurricane Katrina work with their health professionals to gain access to their own electronic prescription medication records

NIDDK Tools:

Example: Kidney disease/ kidney failure/ dialysis

<http://kidney.niddk.nih.gov/kudiseases/topics/failure.asp>

FEMA Tools:

Example: FEMA's Emergency Management Institute

EMI offers the mandatory National Incident Management System (NIMS) training.

<http://training.fema.gov/>

JDRF Tools:

Example: **Relief Response for Hurricane Katrina Victims**

[Diabetes Emergency Checklists](#)

[Diabetes Sample School Care Forms](#)

ADA Tools

Example: Available at <http://www.diabetes.org>

AADE Tools:

Example: General Discussion E-Communities: Hurricane Outreach

People with Diabetes Affected by Hurricane Katrina (2005 website)

Disaster Preparedness for Persons with Diabetes

Presentation by Kissane & Rogan

Communication Tools

City of San Antonio Emergency Management Office

Legal Tools: PROCLAMATION by the Governor of the State of Texas

Practice Parameters for Nursing Care

“The nursing fundamentals practiced in normal daily situations and during smaller crises will be applicable during a special event or mass casualty situation”

http://www.texasnurses.org/rtn/disaster_nursing.pdf

Legal Tools: Volunteers are protected under both state and federal law

- Must act within the scope & responsibilities of applicable professional license
- To qualify as a volunteer, must not accept any reimbursement except for expenses

Legal Tools: License

Texas Addressed:

Nurse

Pharmacist

Dietitian

Legal Tools:

- Bar Coded ID Badges: Tracking Medical Personnel in Emergencies
- Standing Medical Orders
- Personal Liability Insurance (just a good idea!)

Ready Texas Nurses

- Each nurse who joins provides Ready Texas Nurses with their clinical specialty information and nursing licenses are verified.
- **Just-in-Time Learning**-Provides training to current standards
<http://www.texasnurses.org/rtn/rtn.htm>

Ready Texas Nurses

Disaster Volunteer Personal Item List

- Stethoscope
- BP Equipment
- Appropriate clothing/shoes
- Personal medications
- Writing supplies
- Extra pair of eye glasses
- Personal cell phone AND charger
- Insect repellent/Sun screen
- Alarm clock
- Driver's license
- R.N. license
- Personal cash/Traveler's Checks
- PDR or Drug Reference
- Sleeping bag and pillow
- Personal hygiene items
- Lab coat
- Picture/Name badge
- Hand sanitizer
- Flashlight/batteries

Community and State Tools

- Texas Diabetes Council Toolkit
- N.O.D. National Organization on Disability
- Case Management
- Clinic Forms/Charts

Providing Standardization through the Maze!

From CDC:

- Keep It With You: Personal Medical Information Form
- Hurricane Evacuee Medical Intake Form (V.4)
- Diabetes Clinic Volunteer Information Sheet
- Diabetes Clinic Staff Schedule
- Patient Clinic Chart (includes CDC's forms, medication log, etc.)
- Triage Note

Remember to provide for pt privacy and try to be HIPPA compliant and follow OSHA rules!

AADE Chapter Tools

- Diabetes Clinic Volunteer Information Sheet
- Diabetes Clinic Staff Schedule
- Patient Clinic Chart (also used with CDC intake form)
- Vendor, Inventory, and Supply Lists
- Clinic Educational Materials

Texas Department of State Health Services and Medline

Hurricane Katrina Information for Health Care Professionals and Allied Fields

http://www.dshs.state.tx.us/dshstoday/kat_professionals.shtm

FYI and Clinic Supplies

Strategic National Stockpile

<http://www.bt.cdc.gov/stockpile/>

Medline Plus: Disaster Preparation and Recovery

<http://www.nlm.nih.gov/medlineplus/disasterpreparationandrecovery.htm>

AADE Chapter Vendor and Supply Lists

IDENTIFICATION

The Nightmare is Real: *The Scream* (1893), National Gallery, Oslo, Edvard Munch

What Can **You** Do? Evolving Partnerships

SAVOAD - San Antonio Voluntary Organizations Active in Disaster

CERT - Community Emergency Response Team

STRAC- Southwest Texas Regional Advisory Council for Trauma

AADE SPG- ?

The 44 Major Evacuee Recipient Areas

- Huntsville, Alabama
- Mobile, Alabama
- Phoenix, Arizona
- Los Angeles, California
- San Francisco, California
- Denver, Colorado
- Washington, DC area (Maryland)
- Miami, Florida
- Tampa, Florida
- Jacksonville, Florida
- Atlanta, Georgia
- Chicago, Illinois
- Indianapolis, Indiana
- Louisville, Kentucky
- Baton Rouge, Louisiana
- Shreveport, Louisiana
- Boston, Massachusetts
- Detroit, Michigan
- Minneapolis/St. Paul, Minnesota
- Jackson, Mississippi
- St. Louis, Missouri
- Kansas City, Missouri
- Omaha, Nebraska
- Las Vegas, Nevada
- Santa Fe, New Mexico
- New York City, New York
- Raleigh, North Carolina
- Charlotte, North Carolina
- Oklahoma City, Oklahoma
- Philadelphia, Pennsylvania
- Charleston, South Carolina
- Columbia, South Carolina

Diabetes Disaster Clinic

Basic Supply List

Essentials:

- Water – Bottled or indoor plumbing known potable source
- Electricity (verify outlets)
- Flashlight with extra batteries
- Cell phone with charger and extra battery
- Laptop with power cord/extra battery
- Food for hypoglycemia treatment to include diabetic snack bars such as:
 - Extend, Glucerna (those with uncooked cornstarch)
 - Glucose tablets
 - Glucagon kits
 - Be careful with peanut butter contain products because allergy is quite common
- Antibacterial Soap
- Bottles of Waterless Hand Sanitizer
- 2-inch x 2-inch sterile gauze pads
- Gloves, disposable latex and latex-free varieties in small, medium & large
- Garbage bags and garbage cans for regular trash
- Red Biohazard Bags for body-fluid contaminated waste
- Large sharps disposal container
- Emesis Basins
- Plastic Bucket
- Bath Basins for Cleansing Wounds
- Blood Pressure Cuffs
- Stethoscopes
- Glucometers with appropriate test strips
- Exam tables, cots & chairs
- Refrigerator
- Diabetes Medications to include insulins of various types
- Insulin Pump Supplies
- First aid kit:**
 - Sterile adhesive bandages (Band-Aids in all sizes)
 - Assorted Safety Pins
 - 4-inch x 4-inch sterile gauze pads
 - Assorted sizes of sterile rolled gauze
 - Scissors
 - Adhesive tape and allergy-free tape
 - Insulin syringes U-100 with assorted needle lengths
 - Moistened toiettes
 - Thermometer with disposable covers or Temp-a-Dot Disposable
 - Disposable Finger Lancets for Blood Glucose Testing
- Stationery Supplies:**
 - Binders for policies/procedures
 - Staff Sign-In Clip Board
 - Calendar for staffing notification
 - Tablets, Pens, Pencils
 - Bankers Boxes with manila file folders and permanent fine tip markers

Diabetes Disaster Resource Procurement List

Product	Contact Name	Contact Info.	Date Contacted	Result	Comment
INSULIN					
Lantus	Sanofi-Aventis				
Novolog	Novo Nordisk				
Novolin 70/30	Novo Nordisk				
Novolin N	Novo Nordisk				
Novolin R	Novo Nordisk				
Humalog	Eli Lilly				
Humulin 75/25					
Humulin N					
Humulin R					
MEDICATIONS					
Amaryl	Sanofi-Aventis				
Diabinese Chlorpropamide	Generic				
Glucotrol XL Glipizide	Pfizer or Generic				
Diabeta or Glyburide	Sanofi-Aventis or Generic				
Glucophage Metformin hydrochloride	Bristol-Meyers-Squibb or Generic				
Avandia Rosiglitazone maleate	Glaxo-Smith-Kline or Generic				
Actos Pioglitazone hydrochloride	Eli Lilly				

Glucometers					
One-Touch	Life Scan				
Accu-Chek	Roche Diagnostics				
Syringes					
U-100 1ml	Becton-Dickson				
Lancets	Generic				
Sharps Containers	Becton Dickson				
Hypoglycemic Treatments					
Glucose Tablets	Becton Dickson				
Glucose Gel	Paddock Laboratories	www.paddocklabs.com 800-328-5113			
Crackers & Snacks	Multiple				
Glucagon Kits	Novo Nordisk				
Gucerna Bars	Ross Laboratories Gucerna	800-986-8501			
Extend Bars	Clinical Products	www.extendbarworks.com 800-887-2919 FAX: 314-453-0300			
Medic Alerts					
Free Diabetes Identification Necklace	Diabetes Research & Wellness Foundation	diabeteswellness@diabetes wellness.net 202-298-9211			
Bracelets	American Diabetes Association	www.diabetes.org			
Other Supplies					
Phenergan suppositories or IM injectable					

Source: Diabetes Forecast, 2006 Resource Guide

Strategic National Stockpile (April 14, 2005):

CDC's Strategic National Stockpile (SNS) has large quantities of medicine and medical supplies to protect the American public if there is a public health emergency (terrorist attack, flu outbreak, earthquake, etc.) severe enough to cause local supplies to run out. Once federal and local authorities agree that the SNS is needed, medicines will be delivered to any state in the U.S. within 12 hours. Each state has plans to receive and distribute SNS medicine and Medical supplies to local communities as quickly as possible.