Kentucky Statewide Diabetes Strategic Plan, 2024-2028

VISION: All people in Kentucky are equipped, empowered, and engaged to prevent and manage diabetes.

MISSION: To improve health for people living with, or at risk for, diabetes through community engagement, education, capacity building, policy, advocacy, and collaboration.

GUIDING PRINCIPLES: Focus on health equity ● Intentionally engage with communities ● Pursue a collaborative approach ● Use data to drive decision-making ● Choose evidence-based strategies

GOALS (FOCUS ON)	Eliminate disparities among individuals who have systemically experienced greater obstacles to health	Prevent or delay the onset of prediabetes and type 2 diabetes	Improve health outcomes and quality of life among all people with diabetes	Improve quality of care for people with prediabetes and diabetes
OBJECTIVES (MEASURE)	1. Maintain or decrease the percentage of adults living in Eastern Kentucky who have diabetes at 16.2%. 2. Maintain or decrease the percentage of adults with disabilities who have diabetes at 18%. 3. Create or modify at least 5 Diabetes Self-Management Education and Support (DSMES) programs that are tailored to priority populations. 4. Identify at least 3 gaps in health equity data. 5. Increase the average Food Environment Index score in the Appalachian counties from 6.55 to 7.11.	1. Increase percentage of Black/African American adults who are aware they have prediabetes from 15.2% to Y%. 2. Increase the number of participants enrolled in Diabetes Prevention Program (DPP) from 1334 to 3500, with at least X% of participants identifying as Black/African American. 3. Increase the number of CDC-recognized DPP cohorts in Kentucky from X to Y. 4. Adopt at least 2 new statewide policies related to physical activity and nutrition.	1. Increase the statewide average percentage of adults enrolled in a Medicaid MCO plan who have blood pressure control from 57.31% to Y%. 2. Decrease the statewide average percentage of adults enrolled in a Medicaid MCO plan who have poorly controlled A1C scores from 44.6% to Y. 3. Increase the number of DSMES programs provided from 350 to Y. 4. Increase the percentage of adult Medicaid beneficiaries who use DSMES benefit from 0.4% to Y. 5. Increase the number of individuals with diabetes participating in accredited or recognized DSMES programs annually from X to Y, with at least X% of participants identifying as Black/African American.	1. Increase the number of referrals to the DPP among people living in Appalachia from 375 to Y. 2. Increase the number of referrals to DSMES among people living in Appalachia from 630 to Y. 3. Provide diabetes prevention and management training to at least 150 Community Health Workers. 4. Disseminate at least 3 best practice alerts. 5. Develop at least 3 quality improvement recommendations.
STRATEGIES (WORK ON)	A. Review existing sources to identify gaps in health equity-related data B. Promote diabetes programs, services, and resources tailored to underserved populations C. Recruit workers in healthcare and community that represent the populations they serve D. Provide equity and diversity training for healthcare and public health workforce E. Evaluate and advocate for policy, systems, and environmental changes that address social determinants of health impacting diabetes	A. Increase referrals to DPP and other lifestyle change programs B. Expand program offerings for DPP and other lifestyle change programs C. Increase access to nutritious foods and safe accessible physical activity opportunities	A. Increase referrals to DSMES programs B. Expand offerings of diabetes management programs and services C. Equip people with diabetes and their support networks with resources for diabetes self-management	A. Share best and promising practices related to diabetes and prediabetes B. Improve capacity for, and use of, diabetes surveillance systems and Health Information (HIT) systems C. Promote interdisciplinary patient care across community and healthcare sectors D. Expand the diabetes workforce

PRIORITY POPULATIONS: ***People who live in***: Appalachia/Eastern Kentucky; Rural Areas ● ***People who have:*** Lower incomes; Lower education levels; Disabilities ● ***People who are:*** Black/African American; Native American; Hispanic/Latino; Asian American; Multiracial; LGBTQ+; Pregnant; Aged 65+; Youth at risk for diabetes