

Diabetes Workgroup 2/9



Workgroup Goals



SMARTIE Goals



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STRATEGIC	Reflects an important dimension of what your organization seeks to accomplish (programmatic or capacity-building priorities).
MEASURABLE	Includes standards by which reasonable people can agree on whether the goal has been met (by numbers or defined qualities).
AMBITIOUS	Challenging enough that achievement would mean significant progress—a “stretch” for the organization.
REALISTIC	Not so challenging as to indicate lack of thought about resources, capacity, or execution; possible to track and worth the time and energy to do so.
TIME-BOUND	Includes a clear deadline.
INCLUSIVE	Brings traditionally marginalized people—particularly those most impacted—into processes, activities, and decision/policy-making in a way that shares power.
EQUITABLE	Seeks to address systemic injustice, inequity, or oppression.

Quintuple Aim



Quintuple Aim	Draft Workgroup Goals
Cost/Value	<ul style="list-style-type: none">• Investigate funding mechanisms for high-quality diabetes care.• Address rising costs of insulin and coverage options for people living with diabetes.
Care Experience	<ul style="list-style-type: none">• Ensure high-quality care for people living with diabetes.• Ensure people living with diabetes are offered a wide variety of treatment options, including referrals to community organizations providing education and care management.
Population Health	<ul style="list-style-type: none">• Identify at-risk populations and improve screening for pre-diabetes and gestational diabetes.• Improve prevention activities including education and management programs.
Clinician Burnout & Well-Being	<ul style="list-style-type: none">• Increase efficacy of diabetes care and reduce administrative burden.• Collaborate across sectors and reduce care silos. Ensure skill-task alignment for all members of the care team.
Health Equity	<ul style="list-style-type: none">• Increase equitable access to testing, treatment, and medications.• Address disparities in diabetes outcomes for priority communities.

Brainstorming and Sub-Groups



The problems



- What are health problems for people with diabetes in Washington State?
- Who are the priority populations for achieving equitable diabetes care?

Complicating factors



- What are risk behaviors or social factors associated with worsened health outcomes for people with diabetes?
- How can our workgroup and recommendations address these factors?

Potential Solutions



- What action items can be done to increase access to quality diabetes management and improve diabetes prevention and treatment in Washington?
- What are some barriers to implementing these solutions?

Potential Sub-Groups



By Diabetes
Diagnosis

By Healthcare
Stakeholder

Population Sub-Groups



Type I

Type II

Pre-
Diabetes

Gestational
Diabetes

Children &
Adolescents

Stakeholder Sub-Groups



Clinicians
and/or
Delivery
Systems

Community
Orgs

Plans &
Purchasers

Public Health
Agencies