



Virginia Diabetes Council Success Story

COLLABORATIVE IMPROVES HEALTHCARE FOR THE UNDERSERVED

Two state projects and a primary care association join forces to reduce health disparities

Public Health Problem

- Healthcare collaboratives track quality measures such as adherence to recommended disease management guidelines as a way to help practitioners assess and improve the care they give to people with chronic diseases.
- By taking steps to impact the most vulnerable populations, such as those people served by community health centers, collaboratives can also reduce health disparities and enhance health outcomes.

Program

- The Virginia Community Healthcare Association is the statewide association for community health centers providing primary health care to people who otherwise would have little or no access to care.
- The Virginia Heart Disease and Stroke Prevention and Diabetes Prevention and Control Projects, part of the Virginia Department of Health, partnered with the Virginia Community Healthcare Association to support a Diabetes and Cardiovascular Health Disparities Collaborative. This Collaborative is part of a national effort, through the Health Resources Services Administration, to eliminate disparities and improve healthcare delivery.
- The partnership, and the continued funding, leadership and technical assistance provided by the two state health department projects under a contract, enabled the Association to enroll forty six community health centers in the Collaborative. These centers serve mostly rural areas and represent over half of the Association's members and over forty percent of the providers.

Impact

- The National Rural Health Association's 2008 Rural Health Quality Award was given to the Diabetes and Cardiovascular Health Disparities Collaborative initiative in recognition of innovative best practice and significant contributions to the quality of health care in rural America.
- The Collaborative has been granted the important 'equivalency' status, meaning that centers' participation in the state-based collaborative is considered equivalent to participating on a federal level and that the Collaborative joins the national Health Disparities Collaborative and contributes to its database.
- Numbers of patients in Collaborative registries are increasing dramatically - the cardiovascular patient registry doubled its numbers and the diabetes patient registry has increased by forty-five percent in just one year meaning significant numbers of underserved patients will have their healthcare monitored to ensure quality.

Relation to the Virginia Diabetes Plan 2008-2017:

Initiative 6 – Quality of Care; Goal 2; Objectives 1 and 3.

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