RECRUITING PARTICIPANTS FOR YOUR TYPE 2 DIABETES PREVENTION LIFESTYLE CHANGE PROGRAM

Keys to Success

The Keys to Success tip sheet series provides lessons learned and insights from others implementing the National Diabetes Prevention Program (National DPP) lifestyle change program on the topics of

- Enrolling and recruiting participants.
- Improving participant retention.
- Collecting and monitoring data.
- Achieving program goals and meeting Diabetes Prevention Recognition Program (DPRP) requirements for CDC full recognition.

Recruiting eligible participants with prediabetes is critical for your type 2 diabetes prevention lifestyle change program. Programs with a proven record of successfully recruiting eligible participants have shared the following tips and lessons learned based on their experiences. The keys to success listed first may be more applicable to newer programs, while those listed next may prove to be useful for more established programs. Assess each of the recruiting tips to identify those that are most applicable to your program and community.

BEGIN RECRUITING AND START-UP EFFORTS EARLY

- Begin recruiting efforts at least 3 months in advance of your anticipated first class.
  - Incorporate sufficient time in your plans to identify interested and eligible participants and enroll them in the class.

CDC offers a number of resources for screening, testing, and referral that may be helpful for your program.

- Address logistical barriers early.
  - Address program logistics—like program space and class scheduling—early in program start-up to help increase participant enrollment.

“Outreach and recruiting require a long lead time, so it helps to begin these efforts at least three months before a class starts.”
KEYS TO SUCCESS: RECRUITING PARTICIPANTS FOR YOUR TYPE 2 DIABETES PREVENTION LIFESTYLE CHANGE PROGRAM

CONSIDER OFFERING A “SESSION ZERO”

» Offer a Session Zero to increase participant enrollment.
  » Use a Session Zero to introduce potential participants to program expectations.
  » Enroll committed participants after answering their questions and resolving barriers.

PARTICIPATE IN COMMUNITY OUTREACH EFFORTS AND HEALTH FAIRS

» Go to where your target population is—attend popular community or health fair events.
  » Host a table or booth at a popular community event or health fair to promote the National DPP to attendees.

» Participate in health screening events.
  » Participate in screening events sponsored by communities, employers, insurers, and large retailers to identify potential program participants.
  » Use these events to raise awareness of your program and promote enrollment.

See the lifestyle coach video for additional information and use available resources for recruiting participants and the prediabetes screening test at community events.

USE PEER RECRUITING OR WORD-OF-MOUTH

» Encourage current and previous participants to refer new participants to the program.
  » Ask current and previous participants to share their own experiences, including successes, challenges, benefits, and program expectations with potential participants.

» Collect and share success stories from current organizations delivering the lifestyle change program.
  » Share examples of stories that have been used to promote the program and word-of-mouth or peer recruiting strategies that programs have found to be successful.

For other positive testimonials from current or former program participants, see the CDC’s National DPP website.

PROGRAM ELIGIBILITY

1. All program participants must be 18 years of age or older. Studies of type 2 diabetes prevention lifestyle programs have not included children; these programs are intended for adults at high risk for developing type 2 diabetes.

2. All program participants must have a body mass index (BMI) of ≥24 kg/m² (≥22 kg/m² if Asian American).

3. All program participants must be considered eligible based on either:
   • A recent (within the past year) blood test (may be self-reported) or claim code indicating they have prediabetes, or a history of gestational diabetes mellitus (GDM), according to one of the following specifications. A minimum of 50% of the participants must be identified this way:
     - Fasting glucose level of 100 to 125 mg/dl.
     - Plasma glucose level measured 2 hours after a 75 gm glucose load of 140 to 199 mg/dl.
     - An A1c level of 5.7 to 6.4.
   • Clinically diagnosed GDM during a previous pregnancy (may be self-reported). A positive screening for prediabetes based on the CDC Prediabetes Screening Test, or high risk for type 2 diabetes on the hardcopy or electronic version of the American Diabetes Association Type 2 Diabetes Risk Test.

4. Participants cannot have a previous diagnosis of type 1 or type 2 diabetes prior to enrollment.

» Use self-referral or word-of-mouth to increase enrollment.
  » Use self-referral or word-of-mouth recruitment strategies to boost enrollment, particularly for individuals belonging to minority populations.
BUILD AND ENHANCE THE REFERRAL NETWORK

Include a variety of local partners in the referral network.

- Ensure diverse representation from different groups in the community to maximize the reach to potential participants.
- Include local partners such as hospitals, clinics, employers, faith-based organizations, and other community-based organizations.

CDC offers materials to share with your colleagues and health care team to educate them about CDC-recognized diabetes prevention programs.

“Energy must be focused on building and enhancing referral networks because this is the primary driver of participants.”

EMPHASIZE PHYSICIAN REFERRALS

Use physician and health care provider champions.

- Identify one motivated physician or provider champion committed to screening, testing, and referring patients with prediabetes.
- Encourage champions to influence others in their health care system to also identify and refer patients.

“Build referral systems with health care providers that are integrated into routine clinical flow, and include a feedback loop so referring providers are updated on participant progress.”

Engage constantly with health care providers and clinics.

- Communicate, engage, and share information frequently with physicians or health care providers and clinics to build trust.
- Establish a relationship with the physician or health care provider or clinic to increase the likelihood of referral.

Optimize bidirectional communication with participants’ physicians or health care providers.

- Share information on participant progress in the lifestyle change program with referring physicians to close the referral loop. This is vital for continued physician referrals.

Provide support for physicians to increase screening, testing, and referral.

- Provide physicians with needed support (e.g., tools to aid with screening, testing, and patient referral; materials to engage patients and educate them about the risks of prediabetes; materials to share with a health care team to educate them about the benefits of a CDC-recognized diabetes prevention lifestyle change program).

TRY A VARIETY OF MARKETING STRATEGIES TO REACH PARTICIPANTS

Use multiple marketing modes to increase awareness and enrollment.

Direct mail.

- Send letters and follow-up notices of National DPP information sessions to allow individuals to read about the program and inquire further if interested.

Newspaper print ads and/or online banner ads.

- Customize ads to increase visibility within various population groups and to generate inquiries.
Help Employers Market the Program to Employees

- Provide employers with marketing resources.
  - Provide resources to employers who are working with you to offer the National DPP lifestyle change program to their employees as a covered benefit.
  - Include a variety of resources, including e-mail templates, letter templates, flyers, and online banner ad samples, along with information on how to use each item to promote the National DPP.

CDC offers resources for employers and insurers.

Other Strategies Proven to Increase Enrollment

- Offer more cohorts to increase participant enrollment rates.
- Make cultural adaptations to reflect your community, such as delivering the lifestyle change program in Spanish by using the Spanish version of the curriculum.
- Reduce barriers to participation (e.g., provide transportation, onsite child or elder care, financial assistance/scholarships, access to healthy foods) among targeted vulnerable groups to increase program enrollment.

Helpful Resources

- Prevent Diabetes STAT for Healthcare Professionals
- Prevent Diabetes STAT Toolkit
- CDC Diabetes Prevention Program Screening and Referral Resources
- CDC Diabetes Prevention Program Resources for Recruiting Participants