

# Moving to Virtual Platforms: Living Healthy Chronic Disease Self-Management Program

*Community Practice Brief*

*July 2020*



## **About the Program**

Living Healthy with Chronic Disease Self-Management Education is an evidenced-based program developed at Stanford University. The program is designed for people who are living with chronic diseases as well as caregivers who want to build skills in managing the symptoms and improve their health. Stanford led a randomized controlled trial with over a thousand individuals. The study looked at the individuals longitudinally to see how they responded to the curriculum and how it impacted health care utilization. People who engage in the curriculum are more activated in managing their health and use the health care system in more appropriate ways, meaning they went to primary care physicians instead of the emergency room and in-patient admissions were reduced as well.

Living Healthy is provided as an in-person, six-week class. The class is led by two lay leaders who receive training and facilitate the class. The classes meet once a week for 2 ½ hours during the six-week period. The focus of the program is on developing healthy coping skills to manage and improve health. Topics include nutrition, decision making, managing medications, exercise, talking with your healthcare provider, skills for managing symptoms of chronic diseases and more. It is a nice complement to clinical care that is being provided through other facilities. During each workshop, participants set a realistic goal for each week and report back on how they progressed with the goal. Participants and lay leaders can provide feedback and support.

## **Move to Virtual Platform**

With the onset and continuation of the world-wide COVID-19 pandemic, there is a need for telehealth. According to Wikipedia, telehealth is the use of health services and information using communication technologies, such as computers and mobile devices, to manage your health remotely. Carolina Health Net Living Healthy leaders felt the urgency to move the program to a virtual platform, so that people could continue receiving the education, skills, and support needed to manage their health. And, there is an even greater need for human connection and interaction.

## **Process**

- Meet with lay leaders and program staff to discuss and plan the transition to a virtual platform.
- Choose a virtual platform – Zoom, GoToMeeting, WebEx, google meet etc.
- Adapt the curriculum for a virtual platform. The curriculum is usually offered in 2 ½ hour sessions. In this community example, the sessions were divided into 1 hour 15-minute sessions and the meetings were held more often.
- Class materials were mailed or dropped off on the doorstep of the participant's home.
- Questionnaires and evaluations were moved to an online system. It is a much more streamlined way to capture the data from the participants.
- Meet with participants before the class begins to ensure they feel comfortable using the virtual technology. Institute for Healthcare Improvement suggest this tip as well to make sure the telehealth visit goes smoothly.
- Provide tip sheets to participants on how to use the technology.
- For the first class, have someone familiar with the technology attend the class with the lay leaders and participants so any technological issues can be addressed. Institute for Health Care Improvement identifies having additional team members join the telehealth visit as an opportunity to reduce technical difficulties.
- Hold classes and allow flexibility to address any challenges.
- Check in with lay leaders and participants for ways to improve the program.

### Additional Tips and Considerations

- Start small. Figure out what your challenges are and build from there. The recommended number of participants is 8-12 in the in-person classes. Start with a smaller group for your first virtual program.
- Cost shifting is possible because there are costs associated with in-person meetings such as snacks or meals and fees for space rental. This funding can be shifted to mailing or other technology needs.
- Connectivity – internet connection can be spotty, especially in rural areas. NC Department of Information Technology shares that: “According to the Federal Communications Commission, only 59.4% of North Carolina households subscribe to at least 25 Mbps download and 3 Mbps. The American Community Survey found that almost 25% of households do not subscribe to any internet services at all.” An option is to provide WIFI hotspots for participants to use during the classes. For example school buses have been equipped with WIFI and parked in rural areas to support communities in having access to the internet for school, work, and telehealth.
- Participants need a device for connecting virtually. If a participant does not have a device, an option is to provide a lending option during the program.

### Benefits of Using the Virtual Platform

- Provides a way to alleviate social isolation for participants.
- Allows for freedom and flexibility in addressing participants’ needs.
- Lowers attrition due to reduction of barriers.
- Provides the opportunity for participants to manage and improve their own health.
- Allows for further geographical reach.
- Reduces barriers to attending classes, such as needing childcare or transportation. “People who live together and learn together – there’s a lot of power in that.” ~ Sherry Hay

### Resources:

Center for Disease Control. *Chronic Disease Self Management Program: You’re your Patients Take Charge.*

Accessed at: [https://www.cdc.gov/arthritis/marketing-support/1-2-3-approach/docs/pdf/provider\\_fact\\_sheet\\_cdsmp.pdf](https://www.cdc.gov/arthritis/marketing-support/1-2-3-approach/docs/pdf/provider_fact_sheet_cdsmp.pdf)

Healthy Aging NC. *Living Healthy with Chronic Disease Management.* Accessed at:

<https://healthyagingnc.com/workshop/living-healthy-chronic-disease-management/>

Institute for Healthcare Improvement: *Tips You May Not Know to Improve Telehealth for Patients and Providers.*

2020. Accessed at: <http://www.ihl.org/communities/blogs/tips-you-may-not-know-to-improve-telehealth-for-patients-and-providers>

NC Department of Information Technology. *Closing the Digital Divide.* Accessed at:

<https://www.ncbroadband.gov/digital-divide/closing-digital-divide>

NC Governor Roy Cooper. *School Buses to Serve as WIFI Hotspots for Remote Learning.* 2020. Accessed at:

<https://governor.nc.gov/news/school-buses-serve-wi-fi-hot-spots-remote-learning#:~:text=As%20many%20as%20280%20more,is%20providing%20up%20to%2080.>

Wikipedia: *Telehealth Definition.* Accessed at: <https://en.wikipedia.org/wiki/Telehealth>

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