Goals

The overall purposes of this 3-year grant are to:

- **Goal 1:** Develop or expand capacity to significantly increase the number of older adults and adults with disabilities, particularly those in underserved areas/populations, who participate in evidence-based chronic disease self-management education and self-management support programs to empower them to better manage their chronic conditions.

- **Goal 2:** Enhance the sustainability of evidence-based chronic disease self-management education and self-management support programs through the implementation of robust sustainability strategies.

Strategies and Activities

EHRI and its partners will:

- Embed CDSMEs into Title III nutrition programs, including home-delivered meals and congregate meals.

- Engage and motivate older adult diabetics and those with other chronic conditions to participate.

- Recruit volunteers age 55+ with chronic conditions to train as peer leaders.

- Enable virtual participation, including removing barriers due to disabilities and impairments.

- Train CDSME peer leaders in partnership with Delaware Division of Public Health (DPH).

- Train EHRI’s Nurse Advocate and Reliant Care Solutions (RCS) staff in the HomeMeds program.

- Partner with key local stakeholders who will consider integrating CDSMEs as part of their treatment and exit plans.

Proposed Interventions

- Chronic Disease Self-Management
- Diabetes Self-Management
- HomeMeds
- Volunteers recruited and trained
- Technology use via DATI and others

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Partnerships

To achieve the goals of the grant, EHRI will collaborate with the following key partners:

- DATI – Delaware Assistive Technology Initiative
- DPH – Delaware Division of Public Health
- DSAAPD – Delaware Division of Services for Aging and Adults with Physical Disabilities
- HomeMeds – Medication for in-home services
- MMC – Modern Maturity
- La Red – FQHC
- Reliant Care Solutions

Anticipated Results

EHRI and its partners propose to achieve the following results:

- Improved health of participating seniors, *as measured by CDSME-suggested assessment tools (e.g., blood sugar levels for diabetics; blood pressure for hypertensives).*
- Enhanced sense of wellbeing in participants, *as measured by surveys of participants compared to Meals on Wheels 2020 data cited above.*
- Reduction of health costs among participants, *as measured by reduced pm/pm costs.*
- Greater government and payer integration, *as measured by level of financial support for CDSMEs and SMPs.*
- Greater CBO buy-in and support, *as measured by the number of CBOs integrating CDSMEs and SMPs into their treatment and existing plans.*
- Stronger platform for virtual delivery of CDSMEs.

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