



'Great Camps, Healthy Futures'

Diabetes Education and Camping Association Newsletter

JANUARY 2011

DECA Mission Statement: The Diabetes Education and Camping Association promotes communication, provides education, shares resources and serves as a worldwide voice to advance diabetes education and camping programs that meet the diverse needs of individuals and families.

DECA 2011 Camp Staff Development Conference

October 5 - 9, 2011

at Spring Hill Camp, Seymour, Indiana

hosted by No Limits Diabetes

**MARK YOUR
CALENDARS!**

Keynote Speaker: Arthur Ainsberg, author of new bestseller, "Breakthrough"

We will also be spending a full day at the Eli Lilly Headquarters, touring the Heritage Center, as well as the Production Line.

More details coming in February!

Reminder!

Join DECA with a Camp Membership before February 28 and receive a 50% discount!

To register, go to the link below and follow instructions:

<http://www.diabetescamps.org/index.php?>

[option=com_dtregister&eventId=6&Itemid=50&task=event_register&type=reg_individual](http://www.diabetescamps.org/index.php?option=com_dtregister&eventId=6&Itemid=50&task=event_register&type=reg_individual)

DECA's Camp Membership fee schedule is based on number of camper days (number of campers x number of days they are at camp).

\$50 1-249

\$100 250-999

For every additional 1000 camper days, add another \$75.

See page 2 of this newsletter for more information.

For assistance, email [Kathy Latimer](mailto:Kathy.Latimer@deca.org).

The Diabetes Education and Camping Association
Membership Categories and Fees
January 1, 2011 – December 31, 2011

Camp Membership: Diabetes Camp Membership may be granted to camps whose primary programs and services are provided to campers living with diabetes. Primary shall be defined as more than 85% of the total population served has diabetes. Membership runs from the time paid until December 31st. These camps must pay the fee between January 1st and February 28th to be eligible for all benefits. The Camp Membership entitles camps to many benefits, including:

- » An unlimited number of free individual memberships for your staff (or volunteers) and parents 18 and over, as approved by the Executive Director/Camp Director
- » Unrestricted access to all features of the DECA website (by validated password for your camp), including downloadable “best practice resources”, logo, PowerPoint presentations, and video staff training programs:
 - ♦ Leadership Essentials staff training video program by Dr. Chris Thurber
 - ♦ DECA’s own diabetes management training videos (coming in 2011)
- » Inclusion on the “Industry Partners” database that ensures you will receive donated supplies and materials for your campers
- » Partner opportunities with local Lions Clubs based on the agreement DECA has reached with Lions International that encourages camps and Lions to work together to expand and enhance diabetes camping programs
- » Access to shared best practices on the website and downloadable camp resources, such as “*Diabetes 101*” and “*The Diabetes Camp Survival Guide,*” plus manuals shared by other camp members
- » Access to “DCAT” - the Diabetes Camp Assistance Team - experts who can help you with issues facing your camping program
- » Rights to use the DECA logo on promotional materials, indicating that your camp is a member of the world’s only professional diabetes camping organization
- » Monthly newsletters, inclusion in all notifications of exciting new opportunities, priority and restricted access to new resources and so much more

DECA’s Camp Membership fee schedule is based on number of camper days (number of campers x number of days they are at camp).

\$50 1-249 (40 campers for 6 days = 240 camper days)

\$100 250-999

For every additional 1000 camper days, add another \$75.

There is a 50% discount if you register before February 28, 2011.

To register, go to the link below and follow instructions:

http://www.diabetescamps.org/index.php?option=com_dtregister&eventId=6&Itemid=50&task=event_register&type=reg_individual

If you have previously registered and cannot remember your password or have any problems, please contact [Kathy Latimer](#).

The Diabetes Education and Camping Association

Summary Strategic Plan

December 2010



Mission Statement

DECA promotes communication, provides education, shares resources and serves and a worldwide voice to advance diabetes education and camping associations that meet the diverse needs of individuals and families.

In 2009, The Board of Directors established the following as essential components of achieving the organization's mission (goals are shown in black with the organization's current initiatives outlined under each goal in blue):

- 1) Broaden outreach to international camps and youth**
 - i. **IDF (International Diabetes Federation Youth Program – Dubai, 2011)**
 - ii. **Liaisons with other national diabetes associations/camps**
 1. **European Assn, Australia, ISPAD, Canadian Diabetes Assn, Diabetes UK, New Zealand, Japan**
 - iii. **Lions Clubs International Partnership initiatives**
 1. **Camp session at international convention in 2011**
 2. **Outreach to local Clubs for camps through national office**
 3. **Marketing camps via Lions website and Lions magazine**
- 2) Enhance strategic alliances**
 - i. **Industry Partners Advisory Council**
 - ii. **ADA, JDRF, Children with Diabetes, Lions International, AADE, ACA, ACN, CDA, American Legion, Dawn Youth, IDF, NASN, dLife, College Networks (Christina Roth, Nicole Johnson), Lions Camp Conference**

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- iii. Helmsley Charitable Trust
 - 1. Assist with information gathering
 - 2. Other initiatives as requested (research, surveys)
- 3) Establish and effectively communicate the value of diabetes camps
 - i. Marketing video
 - ii. New website
 - iii. Postcard with JDRF for Bags of Hope
 - iv. Presentations
 - v. Ongoing daily communication via email
 - vi. Social media - FACEBOOK
 - vii. Conferences & outreach via programs like DTreat and visits to camps
- 4) Share best practices and standards of diabetes care with camps
 - i. Diabetes Camp Assistance Team
 - 1. Provide consultation as needed via phone, email and in person
 - ii. Leadership Essentials Video Library
 - iii. Diabetes 101
 - iv. Diabetes Camp Survival Manual
 - v. Downloadable resources on website
 - vi. Diabetes standards development for ADA and CDA
 - vii. Diabetes training videos
 - viii. Diabetes Toolkit
 - ix. Diabetes Staff Training Media Center
 - x. Research project participation & collaboration
 - 1. Dawn Youth
 - 2. TrialNet
 - 3. Outside research via collaboration
- 5) Grow financially, develop milestones for financial growth
 - i. Successfully secure grant funding
 - ii. Sustain, and develop new, IPAC partnerships
 - iii. Set up new accounting for better tracking
- 6) Increase membership and its benefits
 - i. New membership structure
 - ii. Online membership registration and camp database

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- iii. **Members only section of website w/resources**
 - iv. **Expert online training**
 - v. **Create free camp staff component**
- 7) **Create a comprehensive marketing strategy for DECA**
 - 8) **Develop model programs for member camps and other organizations that can be shared**
 - i. **DTreat**

Initiatives Planned for 2011:

- Diabetes Education Toolkit (Funded by Pepsico)**
- Staff Media Training Center (Funded by Medtronic Foundation)**
- DTreats (Ottawa, Utah, New York)**
- IDF Dubai (Youth program)**
- Annual Conference (Iowa)**
- Camp Assistance Team**

DECA Receives Medtronic Grant for Online Staff Training Center

Exciting news recently arrived that Medtronic awarded DECA a \$25,000 grant to create an online, interactive staff training media center complete with video training modules (to complete the 11 training videos that will be available online in 2011); PowerPoint presentations; webinars and downloadable study resources so that camps can more easily prepare and implement staff training for their camps. Many DECA camps operate small programs for short time periods and do not have extensive time to train their staff and volunteers. These tools will allow camp and healthcare directors to start training before staff and volunteers arrive and camp; and to effectively and efficiently train staff once they do arrive. DECA will be reviewing materials from camps across North America to utilize existing resources and will utilize accepted standards and recommendations. If you have staff training modules that you feel should be included in the media center, please send them to shelleyyeager@diabetescamps.org.

DECA
Toll Free Number
(in North America)
866-980-DECA (3322)

Register your camp by
February 28th and receive a 50%
discount for 2011! Have all your staff
complete an Individual Membership
Application (free).

JOB OPPORTUNITIES. . .

DECA Classified Section

Post your open camp jobs on the DECA website (www.diabetescamps.org) in the new classified section and reach passionate, knowledgeable staff for your camp organization. You must be logged on as a member. Go to the *membership tab*, click on *classified* and post your listing with contact info.

Diabetic Youth Foundation seeks Day Camps Coordinator



The Diabetic Youth Foundation of Concord, California (www.dyf.org) seeks a dedicated, passionate individual for their seasonal Day Camps Coordinator Position (February-September).

This position may evolve into a full-time year round position after the completion of the seasonal day camp which ends in September. The Day Camps Coordinator is responsible for developing, planning, organizing and managing multiple aspects of the DYF's brand new Day Camps program for children, teens, and families affected by type-1 diabetes. This program requires someone who is a self-starter, wants to help build the program from the ground up, and is passionate about working in a team-oriented environment.

Other requirements include: Minimum BA or BS degree from accredited college or university; two plus years directing or working with educational and/or recreational programs; experience working in a key leadership position in a child-centered environment; ability to work in a dynamic organization that values flexibility and a collaborative team approach; exceptional public speaking and phone skills; efficient and effective written communication; and willingness to work some weekends and evenings.

For more information, please contact Janet Kramschuster, Director of Programs, at Kramschuster@dyf.org, or send resume with cover letter to Kramschuster@dyf.org. Serious applicants only please. DYF is an Equal Opportunity Employer.

DECA 2011 Camp Staff Development Conference
October 5 - 9, 2011
Spring Hill Camp, Seymour, Indiana
hosted by No Limits Diabetes



SETEBAID SERVICES, INC.
P.O. BOX 196
WINFIELD, PA 17889
(570) 524-9090
FAX (570) 523-0769
www.setebaidservices.org
CONTACT: Mark Moyer



POSITION AVAILABLE

Program Coordinator

Setebaid Services,[®] Inc., an independent, not-for-profit organization dedicated to helping those living with Type 1 diabetes, seeks a Full-Time professional Program Coordinator to manage our diabetes programs and summer camps for children and teens with Type 1 diabetes. The Program Coordinator will plan and manage five summer diabetes camps, family programs, and teen programs. The Program Coordinator will direct all seasonal director training and work to ensure the programs' success. The Program Coordinator will provide staff support to all program planning committees and will report directly to the Executive Director.

Candidates should have a Bachelors degree in a related field and preference will be given to candidates with a Master's degree. Experience with children and teens who have special health needs and office work experience is a must; preference will be given to those with experience with youth living with Type 1 diabetes. Preference will also be given to those with marketing experience.

Setebaid Services is a rewarding place to work and offers a competitive compensation package including salary, commensurate with experience, and a benefits package worth over \$10,000 annually. Benefits include health insurance, dental insurance, life insurance, disability insurance, a 401K plan, paid holidays, sick days, personal days, and vacation time.

INTERESTED APPLICANTS: Interested candidates should submit a resume and cover letter with salary history to:

Mark Moyer, MBA, MHA
Executive Director
Setebaid Services, Inc.
P.O. Box 196
Winfield, PA 17889-0196

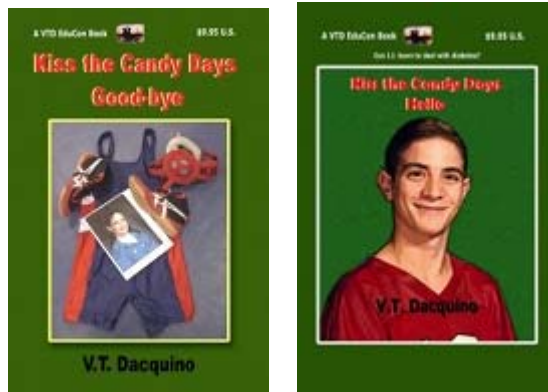
OR email it to: Mark Moyer at info@setebaidservices.org

All of Setebaid Services[®] programs and its office are non-smoking/tobacco-free environments; smoking and tobacco usage are not permitted on-site at any of our programs.

Setebaid Services,[®] Inc. is an equal opportunity employer and does not discriminate against any applicant because of race, religion, sex, national origin, age, disability, medical condition, sexual orientation, marital status, veteran status, or any other legally protected group.

Author, V.T. Dacquino, Comes to Camp Bearing Gifts

Vin Dacquino, author of *Kiss the Candy Days Good-Bye*, a novel released in 1982 about a young boy with diabetes, visited the Circle of Life Camp this year bearing gifts for the campers who waited anxiously to hear what he had to say to them. The Circle of Life Camp, Inc. is a not-for-profit resident camp for children and their families with diabetes. The camp was founded in 1996 by Alicia McAuliff-Fogarty and provides the fundamental, age-appropriate diabetes education and social support essential for adolescents to properly manage their diabetes. Dacquino visited the camp last year with a tape recorder, camera and lap top and spent two nights at the camp observing the children in their daily activities. His goal was to gather material for *Kiss the Candy Days Hello* the long awaited sequel to his first book on diabetes.



“Diabetes has come a long way since my first book,” Dacquino told the children, “and you are living examples of that.” He told them his aim was to show his readers that, “Normal is different for every child. Discovering ways to cope with your difference is what makes you special.”

Dacquino told them that in his new book, “13 year old J.J. learns that he has diabetes and immediately blames his father. From a passage on the back cover, Dacquino read, “*My head started spinning. I got up and dragged myself to the bathroom. The scale was out where I had left it and I got on. Two more pounds were gone. I was pretty sure I knew what was happening---my father had put a curse on me by writing a book on diabetes.* Dacquino then said that arguments between J.J. and his father then led to J.J.’s session at the Circle of Life Camp where he learned that he must now, “---be a special kind of normal and that educating yourself on who you are and what you must do to be the best you *you* can be is what life is all about.”

“I learned a great deal from these children and from the camp’s founder, Alicia McAuliff-Fogarty,” Dacquino said. “Dr. Alicia is the epitome of what courage and diabetes education is all about. She has not only learned to deal with her own diabetes, but has contributed to the improvement of life for hundreds of others.

When asked about his next goal, Dacquino said, “My hope is to get a corporate sponsor to help us get *Kiss the Candy Days Hello* and *Kiss the Candy Days Good-bye* into the hands of as many children as possible in the hopes of helping people like Dr. Alicia, the staff of Circle of Life, and DECA with their goal to enrich the lives of these very special children.”

Kiss the Candy Days Hello and *Kiss the Candy Days Good-bye* are both available on Amazon.com for \$9.95 or through Mr. Dacquino’s web site at www.vincentdacquino.com,



For Release: Immediately

Date: January 11, 2011

Refer to: +49-6132-773582 – Judith von Gordon (Boehringer Ingelheim Germany)
+1 203 791-6250 – Kate O’Connor (Boehringer Ingelheim USA)
+1 317-354-7045 – Mark E. Taylor (Lilly Corporate)
+1 317-701-4007 – Kelley Murphy (Lilly Diabetes)

Lilly and Boehringer Ingelheim Announce Strategic Alliance to Bring New Diabetes Treatments to Patients Worldwide

- *Major diabetes care agreement centers on four pipeline compounds representing several of the largest and most promising product classes.*
- *Companies will jointly develop and commercialize a pipeline of oral diabetes agents and basal insulin analogues. The alliance also includes the option to co-develop and co-commercialize an anti-TGF-beta monoclonal antibody.*
- *Boehringer Ingelheim’s innovative late-stage diabetes pipeline drives its expansion into new therapeutic area, supplemented by two basal insulin analogues, currently under development from Lilly.*
- *Agreement furthers Lilly’s commitment to offer one of the broadest portfolios in diabetes care and provide together with Boehringer more options for people with diabetes, their health care providers and payers.*
- *Boehringer Ingelheim will host a media event; Lilly will host an investor conference call today to discuss the content and benefits of the alliance.*

Indianapolis/USA and Ingelheim/Germany –Eli Lilly and Company (NYSE: LLY) and Boehringer Ingelheim today announced a global agreement to jointly develop and commercialize a portfolio of diabetes compounds currently in mid- and late-stage development. Included are Boehringer Ingelheim’s two oral diabetes agents—linagliptin and BI10773—as well as Lilly’s two basal insulin analogues—LY2605541 and LY2963016—as well as the option to co-develop and co-commercialize Lilly’s anti-TGF-beta monoclonal antibody.

Linagliptin is a dipeptidyl peptidase-4 (DPP-4) inhibitor discovered by Boehringer Ingelheim and being developed as an oral once-daily tablet for the treatment of Type 2 diabetes. It is currently under regulatory review in the U.S., Europe and Japan. Boehringer Ingelheim’s
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BI10773, a sodium-dependent glucose co-transporter-2 (SGLT-2) inhibitor, began enrollment in Phase III clinical trials last year. It belongs to a new, emerging class of diabetes compounds that block tubular reabsorption of glucose in the kidney. Currently there are no SGLT-2 inhibitors approved for use.

Lilly's two basal insulin analogue candidates are expected to enter Phase III clinical testing in 2011. Lilly's two basal insulin analogue candidates are LY2605541, a structurally novel basal insulin analogue, and LY2963016, a new insulin glargine product. The agreement also includes an option for Boehringer Ingelheim to co-develop and co-commercialize another Lilly diabetes molecule, an anti-TGF-beta monoclonal antibody, which is currently in Phase II of clinical testing in patients with diabetes with chronic kidney disease.

The alliance will leverage the collective scientific expertise and business capabilities of two leading research-driven pharmaceutical companies to address patient needs arising from the growing global diabetes epidemic.

"We are very excited about this new and extensive alliance with Boehringer Ingelheim, with whom we have partnered successfully in the past," said John C. Lechleiter, Ph.D., Lilly chairman and chief executive officer. "Working together, we will comprise one of the most robust diabetes pipelines in the pharmaceutical industry. For Lilly, this alliance expands our range of offerings for people with diabetes, strengthens our diabetes care capabilities and offers the prospect of near-term revenue opportunities as we address the upcoming loss of patent exclusivity for several of our products."

"Boehringer Ingelheim and Lilly have agreed to form a strategic alliance in diabetes at a time point when we at Boehringer Ingelheim are entering another new therapeutic area with innovative compounds out of our own research and development operations. This cooperation will give Boehringer Ingelheim and Lilly the combined benefits of Lilly's expertise in the diabetes market and two basal insulin analogues as well as Boehringer Ingelheim's rich and innovative late-stage pipeline." said Prof. Andreas Barner, Chairman of the Board of Managing Directors of Boehringer Ingelheim.

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Under the terms of the agreement, Lilly will make an initial one-time payment to Boehringer Ingelheim of €300 million. Boehringer Ingelheim will be eligible to receive up to a total of €625 million in success-based regulatory milestones for linagliptin and BI10773. Lilly will be eligible to receive up to a total of \$650 million in success-based regulatory milestones on its two basal analogue insulins. Should Boehringer Ingelheim elect to opt-in to the Phase III development and potential commercialization of the anti-TGF-beta monoclonal antibody, Lilly would be eligible for up to \$525 million in opt-in and success-based regulatory milestone payments. The companies will share ongoing development costs equally. Upon successful regulatory approval of any product resulting from the alliance, the companies will equally share in the product's commercialization costs and gross margin. Each company will also be entitled to potential performance payments on sales of the molecules they contribute to the collaboration.

As a result of this transaction, Lilly expects 2011 earnings per share dilution in the range of \$0.45-\$0.50, including a charge of approximately \$0.27 per share related to the one-time payment. Assuming a successful launch of linagliptin, Lilly anticipates progressively and significantly less dilution in 2012 and 2013, no dilution to slight accretion in 2014, and more significant accretion in 2015 and beyond. The 2011 financial impact of this transaction will be reflected in Lilly's 2011 financial guidance, which will be provided as part of the fourth quarter and full-year 2010 financial results announcement on January 27, 2011.

Lilly Conference Call and Webcast

Lilly will conduct a conference call with the investment community and media today at 10:00 a.m. EST to discuss today's announcement. Investors, media and the general public can access a live webcast of the conference call through the Webcasts & Presentations link that will be posted on Lilly's website at www.lilly.co. The webcast of the conference call will be available for replay through February 11, 2011.

Boehringer Ingelheim Press Conference and Webcast

Boehringer Ingelheim will host a web-enabled press conference in Frankfurt, Steigenberger Airport Hotel with the media today at 13:30 h CET to discuss today's announcement. Media not
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in attendance can access a live webcast of the press conference through this link: <http://bit.ly/av-event>. The webcast of the press conference will be available for replay through January 18, 2011.

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About Diabetes

Diabetes affects an estimated 285 million adults worldwide and more than 24 million people in the U.S.^(1,2) Approximately 90-95 percent of those affected have type 2 diabetes. Diabetes costs approximately \$174 billion per year in direct and indirect medical expenses in the U.S.⁽³⁾ According to the Centers for Disease Control and Prevention's National Health and Nutrition Examination Survey, approximately 60 percent of people with diabetes do not achieve their target blood sugar levels with their current treatment regimen.⁽⁴⁾

About Boehringer Ingelheim

The Boehringer Ingelheim group is one of the world's 20 leading pharmaceutical companies. Headquartered in Ingelheim, Germany, it operates globally, with 142 affiliates in 50 countries and more than 41,500 employees. Since it was founded in 1885, the family-owned company has been committed to researching, developing, manufacturing and marketing novel products of high therapeutic value for human and veterinary medicine. For more information on Boehringer Ingelheim, please see www.boehringer-ingelheim.co.

About Lilly Diabetes

For more than 85 years, Lilly has been a worldwide leader in pioneering industry-leading solutions to support people living with and treating diabetes. Lilly introduced the world's first commercial insulin in 1923, and remains at the forefront of medical and delivery device innovation to manage diabetes. Lilly is also committed to providing solutions beyond therapy - practical tools, education, and support programs to help overcome barriers to success along the diabetes journey. At Lilly, the journeys of each person living with or treating diabetes inspire ours. For more information, visit www.lillydiabetes.com.

About Eli Lilly and Company

Lilly, a leading innovation-driven corporation, is developing a growing portfolio of pharmaceutical products by applying the latest research from its own worldwide laboratories and from collaborations with eminent scientific organizations. Headquartered in Indianapolis, Ind., Lilly provides answers – through medicines and information – for some of the world's most urgent medical needs. Additional information about Lilly is available at www.lilly.co. C-LLY

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This press release contains forward-looking statements that are based on Lilly's and Boehringer Ingelheim's current expectations, but actual results may differ materially due to various factors. There are significant risks and uncertainties in pharmaceutical research and development. There can be no guarantees with respect to pipeline products (including all of the compounds discussed in this press release) that the products will receive the necessary clinical and manufacturing regulatory approvals or that they will prove to be commercially successful. In addition, there can be no guarantee that the companies will realize the financial and commercial results anticipated from this collaboration. Other risk factors that may affect Lilly's results can be found in the company's latest Forms 10-K and 10-Q filed with the U.S. Securities and Exchange Commission. The companies undertake no duty to update forward-looking statements.

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References:

- (1) The International Diabetes Federation Diabetes Atlas. Available at: <http://www.diabetesatlas.org/content/some-285-million-people-worldwide-will-live-diabetes-2010>. Accessed September 10, 2010.
- (2) Diabetes Statistics. American Diabetes Association. Available at: <http://www.diabetes.org/diabetes-basics/diabetes-statistics/>. Accessed September 10, 2010.
- (3) Direct and Indirect Costs of Diabetes in the United States. American Diabetes Association. Available at: <http://www.diabetes.org/how-to-help/action/resources/cost-of-diabetes.html>. Accessed September 10, 2010.
- (4) Saydah SH, Fradkin J and Cowie CC. Poor control of risk factors for vascular disease among adults with previously diagnosed diabetes. *JAMA*. 2004;291:335-42.