Audit Preparation Checklist

Standard 1: Support for DSMES Services



Education Recognition Program

The Diabetes Self-Management Education and Support (DSMES) team will seek leadership support for implementation and sustainability of DSMES services.

Interpretive Guidance	Indicator	Yes	No
1. Support can also be from expert stakeholders, who can provide purposeful input and advocacy to promote awareness, value, access, increase utilization, and quality.	 The DSMES service will identifying service stakeholders and how each may provide purposeful input and/or advocacy. Above for the 12 months prior to the most recent renewal or original application Above within the past 12 months of the audit date. 		
	 2. This selection of stakeholders will be reviewed/revised annually. Above for the 12 months prior to the most recent renewal application Above within the past 12 months of the audit date 		

Standard 2: Population and Service Assessment

The DSMES service will evaluate their chosen target population to determine, develop, and enhance the resources, design, and delivery methods that align with the target population's needs and preferences.

Interpretive Guidance	Indicator	Yes	No
A. The DSMES service will identify their target population DSMES needs, preferences, and barriers and have a plan to address.	 Documentation exists that reflects annual assessment of: a) The demographics of the target population b) The target population's diabetes type c) The DSMES preferences and needs, and d) Target population's barriers to DSMES services. 		
	A - D above for the 12 months prior to the most recent renewal or original application		
	A - D above within the past 12 months of the audit date		
B. The DSMES service will use resources and delivery methods that align with the target population's needs and preferences.	 Documentation exists that reflects annual assessment of DSMES service resources relative to the target population. (e.g. physical space, staffing, scheduling, equipment, interpreter services, multi-language culturally relevant education materials, low literacy materials, large font education materials, mobile devices, upload devices and DSMES clinic portal accounts, virtual education equipment and platforms) 		
	Above for the 12 months prior to the most recent renewal application		
	Above within the past 12 months of the audit date		

2. Annual documentation exists reflecting a plan to address any DSMES gaps to serve the target population.	
Above for the 12 months prior to the most recent renewal application	
Above within the past 12 months of the audit date	

Standard 3: DSMES Team

All members of a DSMES team will uphold the National Standards and implement collaborative DSMES services, including evidence-based service design, delivery, evaluation, and continuous quality improvement. At least one team member will be identified as the DSMES quality coordinator and will oversee effective implementation, evaluation, tracking, and reporting of DSMES service outcomes. Other members of the DSMES team must have proper qualifications to provide DSMES services.

Interpretive Guidance	Indicator	Yes	Νο
A. The DSMES service has a designated coordinator who oversees the planning, implementation, and evaluation of the service at all sites.	There is documentation of one quality coordinator as evidenced by a position description or performance appraisal tool. Above at the time of the most recent renewal or original application Above at the time of the audit date		
B. The DSMES team includes one or more healthcare professional with current credentials: Registered Nurse (RN), Registered Dietitian Nutritionist (RDN), pharmacist, Board Certified Advanced Diabetes Management professional (BC-ADM®), or Certified Diabetes Care and Education Specialist (CDCES®).	 At least one DSMES team member is a RN or RDN, or pharmacist or BC-ADM®, or CDCES®. Above at the time of the most recent renewal or original application Above at the time of the audit date All healthcare professional DSMES team members must have current licensures and/or registration Above at the time of the most recent renewal or original application Above at the time of the most recent renewal or original application Above at the time of the audit date 		
C. Professional team members must demonstrate mastery of diabetes knowledge and training.	 Professional team members must demonstrate ongoing training in DSMES topics per the CBDCE examination content areas. a) BC-ADM® and CDCES® team member credentials must be current. Above at the time of the most recent renewal or original application Above at the time of the audit date 		

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The service anniversary month can be found on the Recognition certificate.	b) Non-BC-ADM® or non CDCES® professional team members must have documentation reflecting 15 hours of continuing education (CE) from the Certification Board for Diabetes Care and Education (CBDCE) approved CE providers annually per the DSMES service's anniversary month.		
March 4, 2015 - March 4, 2017 Burly - Spritter Grain & Historichy D. American Association	Above for the 12 months prior to the most recent renewal or original application		
	Above for the DSMES service's last Recognition year		
	 c) Non-BC-ADM® or non CDCES® professional team members who do not have 15 hours CEs within the 12 months prior to joining the DSMES team must accrue the 15 hours of CEs within the first four months of joining the DSMES service as a professional team member. Does not apply at the time of applications. All team members at this time must meet guidelines outlined in C.b. above 		
	Above at the time of the audit date		
D. Diabetes Community Care Coordinators (DCCC), previously referred to as paraprofessionals, must be qualified and provide diabetes care and education within their scope of practice and training.	 DCCC team members must have evidence of previous experience or training in: diabetes, chronic disease, health and wellness, healthcare, community health, community support, and/or education methods as evidenced by a resume or certificate. (e.g., community health worker, health promotor, pharmacy, lab or diet technician, medical assistant, peer education, trained peer leader) Above at the time of the most recent renewal or original application 		
	Above at the time of the audit date		
	 DCCC team members must have supervision by a professional DSMES team member. Supervision can be demonstrated by a position description or performance appraisal tool. Above at the time of the most recent renewal or original application Above at the time of the audit date 		

 3. DCCC team members must have documentation reflecting competency and 15 hours of training prior to providing DSMES services and annually per the DSMES service's anniversary month. (e.g., documented in-service training, medication or device training, etc.) Above for the 12 months prior to the most recent renewal or original 	
application Above for the DSMES service's last Recognition year	

Standard 4: Delivery and Design of DSMES Services

DSMES services will utilize a curriculum to guide evidence-based content and delivery, to ensure consistency of teaching concepts, methods, and strategies within the team, and to serve as a resource for the team. Providers of DSMES will have knowledge of and be responsive to emerging evidence, advances in education strategies, pharmacotherapeutics, technology-enabled treatment, local and online peer support, psychosocial resources, and delivery strategies relevant to the population they serve.

Interpretive Guidance	Indicator	Yes	No
A. A written curriculum guides evidence- based content and delivery of DSMES	An evidence-based curriculum with content, learning objectives, method of delivery and criteria for evaluating learning is in place and covers the following 9 topics.		
services.	 a) Diabetes pathophysiology Above at the time of the most recent renewal or original application 		
	Above at the time of the audit date		
	 b) Healthy eating Above at the time of the most recent renewal or original application 		
	Above at the time of the audit date		
	 c) Being active Above at the time of the most recent renewal or original application 		
	Above at the time of the audit date		
	 d) Taking medications – oral, injectable, insulin pump, inhaled 		
	Above at the time of the most recent renewal or original application		
	Above at the time of the audit date		
	 e) Monitoring glucose Above at the time of the most recent renewal or original application 		
	Above at the time of the audit date		
	 f) Acute complications prevention, detection, and treatment including hypoglycemia, hyperglycemia, diabetes ketoacidosis, sick day guidelines and severe weather or situation crisis and diabetes 		
	supply management Above at the time of the most recent renewal or original application		
	Above at the time of the audit date		

	 g) Chronic complications prevention, detection, and treatment including immunizations and preventative eye, foot, dental care, and renal screens and examinations as indicated per the individual's duration of diabetes and health status Above at the time of the most recent renewal or original application 	
	 h) Lifestyle and healthy coping Above at the time of the most recent renewal or original application Above at the time of the audit date 	
	 i) Diabetes distress and support Note: Problem solving is person centered and addressed within each topic area when appropriate. Above at the time of the most recent renewal or original application Above at the time of the audit date. 	
B. There is evidence that the teaching approach is interactive, patient centered, and incorporates problem solving.	The curriculum or other supporting documents are tailored/individualized and involves interaction and problem solving. Above at the time of the most recent renewal or original application Above at the time of the audit date	
C. The curriculum and/or supporting materials are reviewed/revised to ensure they align with current evidence	There is documentation reflecting at least annual review/revision of the curriculum and/or supporting materials by the DSMES team and/or the DSMES service stakeholders. DSMES curriculum in use at the time of the original application or DSMES curriculum in use and review/revision 12 months prior to the most recent renewal application Above within the past 12 months of the audit date	
D. For services outside of the scope of practice of the DSMES team or services, the DSMES team should document communication with referring providers and/or other qualified healthcare professionals to support person - centered care.	 There must be documentation reflecting a procedure for meeting participants' needs when they are outside the scope of practice of the DSMES team or service. Above at the time of the most recent renewal or original application Above at the time of the audit date 	

Standard 5: Person-Centered DSMES

Person-centered DSMES is a recurring process over the life span for a PWD. Each person's DSMES plan will be unique, based on their concerns, needs, and priorities collaboratively determined as part of a DSMES assessment. The DSMES team will monitor and communicate the outcomes of the DSMES services to the diabetes care team and/or referring provider.

Interpretive Guidance	Indicator	Yes	No
A. An assessment of the participant is performed in the	 An assessment of the participant is performed in the following areas to develop the person centered DSMES plan. 		
following areas to develop the person	a) Diabetes pathophysiology and treatment options		
centered DSMES plan. <i>Participants</i>	b) Healthy eating		
receive a	c) Being active		
comprehensive assessment that	d) Taking medications		
includes baseline	e) Monitoring glucose		
diabetes self- management	f) Acute complications		
knowledge, skills,	g) Chronic complications		
and readiness for behavioral change	h) Lifestyle and healthy coping		
-	i) Diabetes distress and support		
For Charts Presented	j) Clinical history (diabetes and other pertinent clinical history)		
During an Audit	 k) Health literacy (ability to understand and interpret) (e.g. glucose targets, A1C target, carb awareness, carb counting, carb choices etc.) 		
Application Reporting Period Charts: At least one of the A – I elements of the DSMES cycle on	Parts of the initial assessment may be deferred from the 2. first DSMES session if applicable and the rationale for deferment is documented.		
page 14 must have occurred during the reporting period.	Above 1a-1k and 2 is included in each of the complete DSMES participant charts that are presented to the auditors from the most recent		
6-Month Prior to Audit Charts: At least one of	original or renewal application reporting period	_	_
the A-I elements of the DSMES cycle on page 14 must have occurred	Above 1a-1k and 2 is included in each of the complete DSMES participant charts that are presented to the auditors from the past 6 months of the audit date		
during the last 6 months.			

Interpretive Guidance	Indicator	Yes	No
B. Each DSMES participant has a person centered DSMES plan with outcomes measured	 Participant's DSMES plan is documented in the medical record. Above is included in each of the complete DSMES participant charts that are presented to the auditors from the most recent original or renewal application reporting period* 		
	Above is included in each of the complete DSMES participant charts that are presented to the auditors from the past 6 months of the audit date		
	 Each DSMES session is documented in the medical record. 		
	Above is included in each of the complete DSMES participant charts that are presented to the auditors from the most recent original or renewal application reporting period*		
	Above is included in each of the complete DSMES participant charts that are presented to the auditors from the past 6 months of the audit date		
	The outcome evaluation of the DSMES is documented for the topic areas covered during each session.		
	Above is included in each of the complete DSMES participant charts that are presented to the auditors from the most recent original or renewal application reporting period*		
	Above is included in each of the complete DSMES participant charts that are presented to the auditors from the past 6 months of the audit date		
C. Each participant will develop an action oriented	 DSMES participants will develop at least one action oriented behavioral change goal. 		
behavioral change plan to reach their personal behavioral goal/s.	Above is included in each of the complete DSMES participant charts that are presented to the auditors from the most recent original or renewal application reporting period*		
	Above is included in each of the complete DSMES participant charts that are presented to the auditors from the past 6 months of the audit date		

	 The outcome of the behavioral change goal/s will be measured and documented. The outcome measurement timing will vary based on the individual and the outcome to be measured. 	
	Above is included in each of the complete DSMES participant charts that are presented to the auditors from the most recent original or renewal application reporting period*	
	Above is included in each of the complete DSMES participant charts that are presented to the auditors from the past 6 months of the audit date	
D. Clinical outcome measures reflect the impact of the DSMES services on the health status of the participant.	The DSMES service will determine at least one participant clinical, or quality of life outcome and it will be measured at baseline and post DSMES for each participant. The outcome assessment timing will vary based on the individual and the outcome to be measured. (e.g. clinical, quality of life, hospital days, ER visits, baby weight, C-section delivery rates, DKA, A1C, missed school work or school days etc.).	
	Above is included in each of the complete DSMES participant charts that are presented to the auditors from the most recent original or renewal application reporting period*	
	Above is included in each of the complete DSMES participant charts that are presented to the auditors from the past 6 months of the audit date	
E. The DSMES team will monitor and communicate the outcomes of the DSMES services to the participant's	There is evidence that the DSMES planned or provided, and outcomes will be communicated to the referring provider and/or other members outside of the DSMES service of the participant's diabetes care team. <i>Note: The outcomes may include one or more of the following:</i> <i>education, behavioral goal/s, and/or other outcome</i>	
diabetes care team.	Above is included in each of the complete DSMES participant charts that are presented to the auditors from the most recent original or renewal application reporting period*	
	Above is included in each of the complete DSMES participant charts that are presented to the auditors from the past 6 months of the audit date	

Standard 6: Measuring and Demonstrating Outcomes of DSMES

DSMES services will have ongoing continuous quality improvement (CQI) strategies in place that measure the impact of the DSMES services. Systematic evaluation of process and outcome data will be conducted to identify areas for improvement and to guide services redesign and optimization.

A. To demonstrate the benefit of DSMES, members of the team track and aggregate relevant participant outcomes	 At least one category (healthy eating or being active or taking medication, etc) of participant behavioral goal outcome will be identified and aggregated at a minimum annually. Note: All participants are not required to select a behavioral goal for this category but for those that did select a goal in this category the outcomes will be aggregated. 	
	Above for the 12 months prior to the most recent renewal application and within the past 6 months for original applications	
	Above within the past 12 months of the audit date.	
	 At least one other participant clinical or quality of life outcome will be identified and aggregated at a minimum annually. Note: For the other outcome, the DSMES provider will attempt to collect this for all participants 	
	Above for the 12 months prior to the most recent renewal application and within the past 6 months for original applications	
	Above within the past 12 months of the audit date.	
B. Formal CQI strategies provide a framework to strive for excellence, quantify successes and identify future	 The DSMES provider will always have a documented quality improvement project and implement new projects when appropriate. The project will include: a) Opportunity for DSMES service improvement or change (What are you trying to improve, fix, or accomplish?) 	
By measuring and monitoring outcome data on an ongoing basis, the	Above for the 6 months prior to the most recent renewal or original application. (Note renewing application CQI projects may have been developed more than 6 months prior to the application but has continued to the time of the application)	
Recognized DSMES team can identify areas for improvement. They can then adjust engagement	Above within the past 6 months of the audit date. (Note CQI projects may have been developed more than 6 months prior to the audit but has continued to the time of the audit)	

strategies and service offerings to optimize outcomes.	b)	Recognized DSMES services will have baseline CQI project data		
		Above for the 6 months prior to the most recent renewal application. This does not apply during the		
		application period for original applications. (Note renewing application CQI baseline may have been established more than 6 months prior to the application due to the		
		same CQI project being continued at the time of the application)		
		Above within the past 6 months of the audit date. (Note CQI projects baseline may have been established more than 6 months prior to the audit due to the same CQI project being continued at the time of the audit		
	c)	Project outcome targets		
		Above for the 6 months prior to the most recent renewal or original application.		
		(Note renewing application CQI projects outcome targets may have been developed more than 6 months prior to the application but has continued to the time of the application)		
		Above within the past 6 months of the audit date. (Note CQI projects outcome targets may have been developed more		
		than 6 months prior to the audit but has continued to the time of the audit)	_	
	d)	Project assessment and evaluation schedule at a minimum every 6 months		
		Above for the 6 months prior to the most recent renewal or original application. (Note renewing application CQI project assessment schedule may have been developed more than 6 months prior to the application but has continued to the time of the application)		
		Above within the past 6 months of the audit date. (Note CQI projects assessment schedule may have been developed more than 6 months prior to the audit but has continued to the time of the audit)		
	e)	Recognized services will have project outcomes measured, assessed, and evaluated at a minimum every 6 months		
		Above for the 6 months prior to the most recent renewal application. This does not apply during the application period for original applications.		
		Above within the past 6 months of the audit date.		
	f)	Recognized DSMES services will have a plan to address gaps identified or service change needs		
		Above for the 6 months prior to the most recent renewal application. This does not apply during the		
		application period for original applications.		
		Above within the past 6 months of the audit date		

Initial Comprehensive DSMES Cycle–Standard 5

