Sample Participant DSMES Assessment Data Collection and Review Policy

***This policy can be used by Recognized Diabetes Self-Management Education and Support (DSMES) Services that do not compile all of the DSMES assessment data in one location in the participant record (paper or electronically).***

Purpose:

* To define what data must be reviewed and the data location in the participant’s record to allow for a complete and thorough DSMES assessment.

Procedure:

* An assessment of the DSMES participant is performed to determine the participant concerns and educational needs in the following topics in preparation for the DSMES planning and provision.
* The participant’s DSMES education plan is set based on their concerns and the above assessment.
* If any part of the initial DSMES assessment needs to be deferred to another time this must be documented along with the deferment rationale.
* In the case of a DSMES audit or application all assessment data points must be included as part of the DSMES chart.

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| **Topic** | **Medical Record Location** |
| Clinical: Health history |  |
| Cognitive: Functional health literacy and numeracy |  |
| Diabetes Distress and Support Systems |  |
| **Assessment of the 9 Topic Areas** |
| Ability to describe the **Diabetes Disease Process** and treatment options. |  |
| Ability to incorporate **Nutritional** management into lifestyle |  |
| Ability to incorporate **Physical Activity** into lifestyle |  |
| Ability to use **Medications** safely (if applicable) |  |
| Ability to **Monitor** blood glucose and other parameters; interpreting and using results |  |
| Ability to prevent, detect and treat **Acute Complications**. |  |
| Ability to prevent detect and treat **Chronic Complications** |  |
| Ability to develop personalize strategies to address **Psychosocial Issues** and concernsExamples: Psychosocial and Self Care Behaviors: Emotional Response to Diabetes, Cultural Influences, Health Beliefs, Health Behavior, Lifestyle Practices, Barriers to Learning, Relevant Socioeconomic Factors |  |
| Ability to develop personalize strategies to **Promote Health and Behavioral Change**Example: goal setting, behavioral change strategies aimed at risk reduction such as preconception care, readiness to change |  |

Note: This policy may be used as is or adapted per an ADA Recognized DSMES service’s needs.

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