

### Advisory Group Activity

**Standard #2:** An advisory group activity is required annually and within 12 months of a DSMES service original or renewal application.

Activity Date: \_\_\_\_\_ 20\_\_\_\_\_

Activity Type (Select One):

- Documented in person meeting
- Documented emails
- Documented phone conversations
- Ballot
- DSME program survey

<i>Advisory Members</i>	<i>Name</i>	<i>Participated</i>	<i>Did not participate</i>
<b>Quality Coordinator</b>			
<b>External Stakeholders</b>			
<b>A Healthcare Professional of another discipline is required for single discipline DSMES services.</b>			

The DSMES service input for improvement or development gained from this activity:

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