Annual Status Report

Application information						
Signature Statement signed by	Reporting Period					
Name:	Start Date:					
Title:	End Date:					
Phone:						
Program Information						
Sponsoring Organization	Quality Coordinator					
Sponsoring Organization Name:	Contact Information:	Contact Information:				
	Name:					
Administrative Officer:	Title:					
Name:	Email:					
Title:	Phone:					
Email:	Fav					
Phone:	Add 1:					
Fax:						
Add 1:						
Add 2:	General Information Type of Electronic Health Record:	General Information Type of Electronic Health Record:				
	□ Epic	☐ Cerner				
	- '	_				
	☐ Centricity	☐ Chronicle				
	☐ E-Clinical Works (ECW)	☐ Meditech				
	☐ All Scripts	☐ Diaweb				

Other:

Multi Site - Site Information Complete this information once for each multi-site included in the application

Site	Name and Contact Information:		Outcome	Target %	Actual %		
	Name:	E	ehavioral Outcome(s)				
	Phone:		Nutritional Management/Healthy Eating				
			Physical Activity/Being Active				
			Taking medications		_		
	Add 1:		Monitoring				
	Add 2:		Preventing, detecting, treating acute complications/Problem Solving				
S	oanish: Single		Preventing, detecting, treating chronic complication/Reducing Risks				
Dis	cilgine:						
Pat	ents are seen in a year						
Tota	al patients seen in last 12 months:		other Participant Outcomes				
			A1c				
			Eye Exam				
			· ·		-		
			BP				
			Lipids				
			Quality of Life				
			Weight Change				
			Patient Experience				
			Other:				
Red	ognition Standards						
	The DSMES entity has documentation of it's organizational structure, mission statement, and goals, and recognizes and supports quality DSMES as an integral component of diabetes care.						
	The DSMES entity has documentation that an established DSMES advisory system exists which involves external stakeholders. There is documented evidence of at least annual input from external stakeholders of the program. (If the program is single discipline, at least one external stakeholder must be a healthcare provider of a different discipline.)						
	The DSMES entity has assessed the diabetes educational needs of the population it serves and addressed how to meet those needs if applicable.						
	A coordinator is designated to oversee the planning, implementation and evaluation of diabetes self-management education. The coordinator has academic or experiential preparation in chronic disease care and education and in program management. The coordinator has appropriate number of CE credits if not CDE or BC-ADM.						
	Diabetes self-management education is provided by one or more instructors. The instructors have recent educational and experiential preparation in education and diabetes management or are a Certified Diabetes Educator. All non-CDE or non-BC-ADM instructor(s) have obtained regular continuing education in the field of diabetes management and education. At least one of the instructors is a registered nurse, dietitian, pharmacist or a CDE/BC-ADM. For single discipline programs a mechanism is in place to ensure that the participant's needs are met, if those needs are outside the instructors' scope of practice and expertise. Paraprofessionals are supervised by a professional instructor and supervision is documented. There is proof of Paraprofessional's diploma, certification, or training. Paraprofessionals must demonstrate training or competency in program topics taught. There must be documentation of 15 hours of diabetes or diabetes related training annually.						
	A written curriculum reflecting current evidence and practice guidelines, serves as the framework for the DSMES entity, including teaching approaches and method of evaluating learning that are interactive, patient-centered and incorporate problem solving. There is evidence of regular review and revisions as needed, at least annually, of the curriculum and/or course materials by DSMES instructor(s).						
	An individual assessment and education plan is developed collaboratively by the participant and instructor(s) to direct the selection of appropriate educational						
	A personalized follow-up plan for on-going self management support is developed collaboratively by the participant and instructor(s). The patient's outcomes and goals, and the plan for on-going self management support are communicated with other healthcare team members.			and goals,			
	The DSMES entity measures attainment of patient-defined goals and patient outcomes at regular intervals using appropriate measurement techniques to evaluate the effectiveness of the educational intervention.						
	The DSMES entity measures the effectiveness of the education process and determines opportunities for improvement using a written continuous quality improvement (CQI) plan that describes and documents a systematic review of the entities' process and outcome data						

Expansion Site - Site Information Complete this information once for each expansion site included in the application

Site	e Name and Contact Information:				
Na	me:				
Pho	one:				
F	Fax:				
Ad	d 1:				
Ad	d 2:				
D	and the Olevale and				
Rec	cognition Standards	n statement, and goals, and recognizes and supports quality DSMES as an integral			
	component of diabetes care.	i statement, and goals, and recognizes and supports quality DSMES as an integral			
	The DSMES entity has documentation that an established DSMES advisory system exists which involves external stakeholders. There is documented evidence of at least annual input from external stakeholders of the program. (If the program is single discipline, at least one external stakeholder must be a healthcare provider of a different discipline.)				
	The DSMES entity has assessed the diabetes educational needs of the population it serves and addressed how to meet those needs if applicable.				
	A coordinator is designated to oversee the planning, implementation and evaluation of diabetes self-management education. The coordinator has academic or experiential preparation in chronic disease care and education and in program management. The coordinator has appropriate number of CE credits if not CDE or BC-ADM.				
	Diabetes self-management education is provided by one or more instructors. The instructors have recent educational and experiential preparation in education and diabetes management or are a Certified Diabetes Educator. All non-CDE or non-BC-ADM instructor(s) have obtained regular continuing education in the field of diabetes management and education. At least one of the instructors is a registered nurse, dietitian, pharmacist or a CDE/BC-ADM. For single discipline programs a mechanism is in place to ensure that the participant's needs are met, if those needs are outside the instructors' scope of practice and expertise. Paraprofessionals are supervised by a professional instructor and supervision is documented. There is proof of Paraprofessional's diploma, certification, or training. Paraprofessionals must demonstrate training or competency in program topics taught. There must be documentation of 15 hours of diabetes related training annually.				
	A written curriculum reflecting current evidence and practice guidelines, serves as the framework for the DSMES entity, including teaching approaches and method of evaluating learning that are interactive, patient-centered and incorporate problem solving. There is evidence of regular review and revisions as needed, at least annually, of the curriculum and/or course materials by DSMES instructor(s).				
	An individual assessment and education plan is developed collaboratively by the participant and instructor(s) to direct the selection of appropriate educational interventions and self-management support strategies. This assessment and education plan and the intervention and follow-up with outcomes assessment are documented in the education record.				
		personalized follow-up plan for on-going self management support is developed collaboratively by the participant and instructor(s). The patient's outcomes and goals, and the plan for on-going self management support are communicated with other healthcare team members.			
	The DSMES entity measures attainment of patient-defined goals and patient effectiveness of the educational intervention.	outcomes at regular intervals using appropriate measurement techniques to evaluate the			
	The DSMES entity measures the effectiveness of the education process and (CQI) plan that describes and documents a systematic review of the entities'	determines opportunities for improvement using a written continuous quality improvement process and outcome data			