# South Dakota Diabetes Education Recognition Program
# Annual Report Requirements

**Step 1** All recognized programs will submit an Annual Report to the SD-DERP by January 31st of each year. The report will include:

- ☐ Completed annual application packet
- ☐ Stakeholder group member list and minutes (Criterion 2-1, 10-1)
- ☐ Program utilization and waiting periods (Criterion 3-3)
- ☐ Program Coordinator's continuing education (Criterion 4-2)
- ☐ Program Instructor(s) continuing education (Criterion 5-2)
- ☐ Data report (Criterion 9-1)
- ☐ 2 SMART measures and programs may have new objectives (Criterion 10-1)
- ☐ Any updates or major changes to any of the Criterion sections require that section to be added to the annual report

Site reviews will be conducted at the discretion of the SD-DERP staff. All sites will be notified in advance of the visit and a mutually agreeable date will be set.

**Failure to submit annual reports will result in program recognition status being revoked.**

# APPLICATION FOR ANNUAL REPORT
# SOUTH DAKOTA DIABETES EDUCATION RECOGNITION PROGRAM (SD-DERP)

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**Send all Materials to:**
**South Dakota Diabetes Education Recognition Program (SD-DERP)**
**South Dakota Department of Health**
**615 East 4th St., Pierre, SD 57501**

**SPONSORING AGENCY/INSTITUTION: _____**
**CONTACT PERSON: _____**
**TELEPHONE: (work) _____ (fax) _____ (other)_____**
**Email _____**
**DIABETES SELF-MANAGEMENT EDUCATION PROGRAM**
**NAME OF PROGRAM: _____**
**LOCATION/ADDRESS: _____**
**_____**

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**Program staff:**

| Position | Name | Profession | Email Address |
|---|---|---|---|
| Program Coordinator | | | |
| Program Instructor | | | |
| Program Instructor | | | |
| Program Instructor | | | |
| Program Instructor | | | |

**DOH OFFICE USE ONLY**

Date Received:_____
Approval Date:_____
Date Returned:_____

**Standard 2 The provider(s) of DSME will seek ongoing input from external stakeholders and experts in order to promote program quality.**

**Criterion 2-1:** A standing stakeholder group consisting of (at minimum) a primary care provider, a professional educator, a consumer (an individual with diabetes or caretaker thereof not employed by the organization) and a community representative (not employed by the organization) shall be established to oversee the DSME Program and must meet at least annually.

Documentation Required: A list of Stakeholder group members and profession.

Reporting Frequency: With initial application **and** every year with annual report.

**Insert text below or attach after page 3.**

**Standard 3 The provider(s) of DSME will determine who to serve, how best to deliver diabetes education to that population, and what resources can provide ongoing support for that population.**

**Criterion 3-3:** An annual assessment of program utilization and waiting periods is conducted and demonstrates that the DSME Program is regularly and conveniently available.

Documentation required: Annual assessment measuring program utilization and waiting periods.

Reporting Frequency: With the initial application **and** yearly with Annual Report.

**Attach after page 6.**

**Standard 4: A coordinator will be designated to oversee the DSME program. The coordinator will have oversight responsibility for the planning, implementation, and evaluation of education services.**

**Criterion 4-2:** The program coordinator will complete a total of at least 5 hours of continuing education each year in diabetes management, educational strategies, behavior interventions and counseling skills.

Documentation Required: Continuing education certificate(s) of completion**.**

**The sponsoring organization will also keep these records on file as they will be reviewed with site visits.

Reporting Frequency: With initial application **and** every year with annual report.

**Attach after page 6.**

**Standard 5: One or more instructors will provide DSME and, when applicable, DSMS. At least one of the instructors responsible for designing and planning DSME and DSMS will be a registered nurse, registered dietician, or pharmacist with training and experience pertinent to DSME, or another professional with certification in diabetes care and education, such as a CDE or BC-ADM. Other health workers can contribute to DSME and provide DSMS with appropriate training in diabetes wand with supervision and support.**

**Criterion 5-2:** The program instructor(s) will complete a total of at least 5 hours of continuing education each year in diabetes management, educational strategies, behavior interventions and counseling skills.

Documentation Required: Continuing education certificate(s) of completion**.**

**The sponsoring organization will also keep these records on file as they will be reviewed with site visits.

Reporting Frequency: With initial application **and** every year with annual report. **Attach after page 4.**

**Any personnel who are not program instructors contributing to DSME or providing Diabetes Self-Management support must be reported to and approved by SD DERP staff. Special consideration may be made for programs that have instructors who meet the diabetes education criteria and are not a RN, RD/LN, or pharmacist.**

**Standard 9: The provider(s) of DSME and DSMS will monitor whether participants are achieving their personal diabetes self-management goals and other outcome(s) as a way to evaluate the effectiveness of the educational intervention(s), using appropriate measurement techniques.**

**Criterion 9-1:** At routine intervals participant outcomes will be assessed to include patient behavior outcomes and clinical outcomes. In order to assess effectiveness, applicable outcomes will be compared to quality indicators or guidelines. This data should be reviewed by the stakeholder group.

Documentation Required: Yearly data report. DSME programs are required to measure at least one behavioral (such as healthy coping, medication adherence, self-monitoring, etc.) and two clinical outcomes (such as HbA1c, weight, BMI, foot exams, blood pressure, dental exams, etc.) for every participant.

Reporting Frequency: With initial application **and** every year with annual report. **Attach after page 4.**

**Standard 10: The provider(s) of DSME will measure the effectiveness of the education and support and look for ways to improve any identified gaps in services or service quality using a systematic review of process and outcome data.**

**Criterion 10-1:** The organization must have a quality improvement policy in place to evaluate both outcome and process measures related to population outcomes. Quality improvement plans must be discussed annually with Stakeholder group or more frequently as warranted by the data.

Documentation Required: Stakeholder group meeting minutes documenting written quality improvement policy. DSME providers need to provide one SMART process and one SMART outcome objectives that relate to data collected from participants. After one year, sites must report process and outcome measures/results based on objectives.

Reporting Frequency: Objectives with initial application **and** measures every subsequent year with annual report. (Objectives may change and are warranted by data.) **Attach after page 4.**