ADCES DEAP DIABETES EDUCATION ACCREDITATION PROGRAM®

DSMES CHART AUDIT TOOL

At the core of high-quality DSMES: Compassionate, Person-Centered Care

Have a conversation, listen to your participant and work collaboratively with them to guide what they need to know and how they learn best.

	STANDARD 5: PERSON-CENTERED DSMES	Notes: Where in the medical record
R	**1. Referral for DSMES** in chart: see adces.org/referdsmes for template & guidelines for Medicare; Referral order will be reviewed for compliance with Medicare Requirements.	
ASSESSMENT	**2. DSMES Needs Assessment** **a) Health Status**: type of diabetes, clinical needs, health history, disabilities, physical limitations, SDOH and health inequities (e.g., safe housing, transportation, access to nutritious foods, access to healthcare, financial status, and limitations), risk factors, comorbidities, and age **b) Psychosocial Adjustment**: emotional response to diabetes, diabetes distress, diabetes family support, peer support (e.g., in-person or via social networking sites), and other potential promotors and barriers **c) Learning Level**: diabetes knowledge, health literacy, literacy, numeracy, readiness to learn, ability to self-manage, developmental stage, learning disabilities, cognitive/developmental disabilities (e.g., intellectual disability, moderate-severe autism, dementia), and mental health impairment (e.g., schizophrenia, suicidality) ***d)*** **Lifestyle Practices**: self-management skills and behaviors, health service or resource utilization, cultural influences, alcohol and drug use, lived experiences, religion, and sexual orientation	
DSMES PLAN	***3.*** **DSMES PLAN*****: Document at least once throughout DSMES intervention:*** How (group, individual) What (Assessment of ADCES7 Self Care Behaviors and needs – to be determined collaboratively between participant and DSMES team) When (number and frequency of visits estimated/anticipated) Where (in person, telehealth (audio or audio-video) combination)	
DSMES INTERVENTION	***4.*** **DSMES Encounters*****: Each item below is required in the documentation at every single encounter*** When: Date of Service and Plan for Follow-Up (timing for next DSMES session) Who: DSMES Instructor/Team and Participant/family in attendance What: Topics Covered (ADCES7 Self-Care Behaviors can be an easy way to document this) How: Participant’s progress with learning Why: Participant’s current progress with SMART goal and action plan; then next steps (what will participant work on between now and next DSMES session documented on two separate encounters)	
	5. Communication back to referring provider ***at least once per referral intervention*** that includes a summary of DSMES provided, participant outcomes, and plan for follow-up (need for additional referral/critical times).	

This tool is used by ADCES (DEAP) Auditors and should be used as a self-audit tool for Quality Coordinators to use for program planning and implementation, EMR template building and self-auditing to ensure your program continues to meet the National Standards for DSMES.

*Add numbers to your de-identified chart to clearly show where each item is located; include notes where needed for additional clarity.