POLICY | PURPOSE STATEMENT:
The purpose of this policy is to establish guidelines of a continuous quality improvement process within the Diabetes Education Center.

SCOPE:
This policy applies to and will be distributed to all employees of the Diabetes Education Center.

DEFINITIONS:
American Diabetes Association (ADA) – To promote quality education for people with diabetes the ADA endorses the National Standard for Diabetes Self-Management Education and Support. If you are seeking reimbursement for diabetes education, it is appropriate to apply for ADA Recognition on your diabetes education program or service.

American Association of Diabetes Educators (AADE) – An association that offers a simplified and streamlined application process that meets the highest quality reimbursement set forward by the Centers for Medicare & Medicaid Services.

Diabetes Self-Management Education – The ongoing process of facilitation the knowledge, skill and ability necessary for diabetes self-care.

National Standards for Diabetes Self – Management Education-are designed to define quality DSME and support and to assist diabetes educators in providing evidence-based education and self-management support.

Plan-Do-Check-Act Cycle – A repetitive four-stage model for continuous quality improvement (CQI) in business process management.
Policy and Procedure

PROCEDURE:
1. The Director of the Diabetes Education Center will evaluate the Center based on the National Standards for Diabetes Self-Management Education. Any areas not meeting the criteria will be brought to the Advisory Committee Meeting for discussion regarding implementing a Continuous Quality Improvement project.

2. After Advisory Committee Meeting, one or more Continuous Quality Improvement projects will be selected.
   a. These projects should be aimed at improving the processes and services the Diabetes Education Center provides to its clients.
   b. Continuous Quality Improvement projects can be recommended by: the Director of the Diabetes Education Center, staff, patients, or the advisory board. Anyone who can identify an area of improvement can recommend a project.
   c. Once a project is selected, the Director will then work through the Plan Do Check Act cycle:

   Plan–Do–Check–Act Procedure
   a. **Plan.** Recognize an opportunity and plan a change.
   b. **Do.** Test the change. Carry out a small-scale study.
   c. **Check.** Review the test, analyze the results and identify what you’ve learned.
   d. **Act.** Take action based on what you learned in the study step: If the change did not work, go through the cycle again with a different plan. If you were successful, incorporate what you learned from the test into wider changes. Use what you learned to plan new improvements, beginning the cycle again.

3. During the ACT phase then the Director will report to the Diabetes Advisory Committee for determination of changes or updates that may need to be done.

4. Documentation of the process will be maintained for the American Diabetes Association Accreditation process and the American Association of Diabetes Educators Diabetes Education Accreditation Program process.
Policy and Procedure

RESPONSIBILITIES | REVIEW | REVISIONS:
It is the responsibility of the Policy & Procedures Committee to review and initiate necessary revisions based on collaboration and input by Policy and Procedure committee and through Administrative management of this policy, including the review and revisions will be the responsibility of the department administrator.

RIGHT TO CHANGE POLICY:
TTUHSC SON Combest reserves the right to interpret, change, modify, amend or rescind this policy in whole or in part at any time to reflect the changes in policy and/or law.