Standard 2

<table>
<thead>
<tr>
<th>National Standard</th>
<th>Essential Highlights</th>
<th>Interpretive Guidance</th>
<th>Checklist</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Standard 2: Stakeholder Input</strong></td>
<td>The purpose of seeking stakeholder input in the ongoing planning process is to gather information and foster ideas that will improve the utilization, quality, measurable outcomes, and sustainability of the DSMES services. A planned, documented strategy to engage and elicit input from stakeholders will shape how DSMES is developed, utilized, monitored, and evaluated. If the provider of DSMES is experiencing a lack of referrals or low utilization, the stakeholders can assist with the solution. The goal is to provide effective and dynamic DSMES services that are person-centered, culturally relevant, and responsive to the referring practitioner and participant-identified needs, ultimately engaging participants in lifelong learning.</td>
<td>Standard two relates to the service seeking input from key stakeholders and experts in their community. Method A formal advisory board or committee is not required, but the DSMES provider must engage key stakeholders to elicit input on DSMES services and outcomes. Input can be completed by phone, survey, email or face-to-face. Stakeholders Stakeholders should be representative of the community where the services are provided and can be identified from DSMES participants, referring practitioners, and community-based groups that support DSMES (e.g., health clubs and health care professionals [both within and outside of the organization]) who provide input to promote value, quality, access, and increased utilization. Timing Programs will attest to the completion of stakeholder input on their annual status report and will be required to submit evidence of this documentation during onsite/desk audits by AADE and/or Medicare.</td>
<td>4. Evidence of a documented process for seeking outside input and includes a list of identified stakeholders YES □ NO □ 5. The program’s outreach to community stakeholders and the input from these stakeholders must be documented annually and available for review as requested YES □ NO □</td>
</tr>
</tbody>
</table>

**Stakeholder Input:**

*The provider(s) of DSMES services will seek ongoing input from valued stakeholders and experts to promote quality and enhance participant utilization.*

**AADE Interpretive Guidance:**

Standard two relates to the DSMES seeking input from key stakeholders and experts in their community.

- Stakeholders’ role is to provide input for ideas to help promote value, quality, access, increased utilization and sustainability.
- Input can be completed by phone, survey, email or face to face.
- Must at least annually.
- **For initial accreditation, stakeholder outreach must occur before or within 6 months of accreditation and again before submitting Annual Status Report.**

Stakeholders are representative of the community where the services are provided.

- Participants who have completed DSMES
- Local specialist such as dietitian, podiatrist, or other community partner
- Referring providers
- Colleagues from local Health and Wellness Centers/Fitness Centers
- Representatives from local churches
- Other healthcare professionals within and outside of sponsor organization
Documentation Requirements for Standard 2:

<table>
<thead>
<tr>
<th>The components for this standard are:</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ Evidence of a documented process for seeking outside input and includes a list of identified stakeholders</td>
</tr>
<tr>
<td>☐ The program’s outreach to community stakeholders and the input from these stakeholders must be documented annually and available for review as requested.</td>
</tr>
</tbody>
</table>

The Essential Elements that are needed for Standard 2 are as follows:

1. List of committed stakeholders with names and roles, with at least one external stakeholder
2. Written documentation of outreach to and input from stakeholders:
   - Minutes of stakeholder meeting(s) showing what you presented to stakeholders
     - including program data and outcomes from Annual Status Report
     - Results of CQI project and input on CQI plan for new year

Additional Resources and Samples from AADE accredited programs

These examples are from actual applications submitted by coordinators managing accredited programs.

- Sample 1
- Sample 2
- Sample 3

This PowerPoint template can be used to present to your stakeholders, and you can assign a notetaker to record their input in the notes section. The content of the template is a suggestion; you can customize it to fit your needs. Then when the next year’s meeting comes around, just update the content. It can be emailed, shown in person, shared through an online conferencing service.

- Blank Template for Meeting Minutes (not required)
- AADE Resources available