

# ***AADE DEAP POLICY***

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**POLICY NUMBER: 5**

**TITLE: COMPLIANCE ENFORCEMENT**

## **POLICY**

Once DSMT programs achieve accreditation from AADE, it is expected that the National Standards for Diabetes Self-Management Education and Support (NSDSMES) will be maintained on an ongoing basis. To ensure maintenance of these standards, accredited programs will submit information periodically for review by AADE and may be randomly selected for an onsite audit as often as AADE deems necessary.

## **PROCEDURE**

### **Annual Status Report**

An Annual Status Report will be submitted annually and include the following information:

- Sponsoring organization name
- Program name
- Program ID number
- Address
- Coordinator
- Data contained in the Annual Status Report will allow AADE to monitor the extent to which accredited DSMT programs are fully implementing the NSDSMES in a continuous manner. Programs will be required to report the following:
  - Any changes in their population they serve
  - Any changes made to address access issues or to meet the needs of the population served
  - The results of a continuous quality improvement project for the past year and the plan presented to and approved by stakeholders for the coming year
  - Number of total participants seen in the program in the past year (programs must see at least one participant to keep their accreditation)
  - Information about program performance measures (behavior change goal achievement and clinical and/or other post intermediate long-term outcome measure).
  - Attestation of following all of the National Standards
  - Attestation that all instructors have the required training and continuing education hours or a CDE or BC-ADM certificate
  - Documentation of presentation to stakeholders and their input

Annual Status Reports are due on the anniversary date of program accreditation. This will occur every year after initial accreditation throughout the four-year accreditation cycle. There will be a sixty-day window in which to submit the annual status report. Example: If the program's anniversary is June 30<sup>th</sup>, then the report will be due after May 30<sup>th</sup> and no later than July 30<sup>th</sup>. Non-compliance with this report may result in loss of accreditation.

The Annual Status and Performance Measurement report is mandatory. It is the responsibility of the program to notify AADE immediately if the DSMT program will not be able to comply within the designated timeframe. If the report is not received, an email will be sent with any actions to complete and a warning date of when accreditation status may be lost. If there is no response to the email, AADE staff make an attempt to reach someone by phone.

### **Change of Status Form**

DSMT programs must submit a *Change of Status* to notify AADE of any of the following changes within thirty days. This can be done online and by email.

- Change in ownership and/or transfer of accreditation status
- Change in program coordinator or instructors
  - Must submit professional license, registration and certifications of the new instructors if CDE or BC-ADM. If not, an official transcript or copies of the CEU certificates for the required 15 hours of continuing education must be submitted.
  - A resume or CV must be submitted for the new coordinator and any paraprofessional staff.
- Contact information change (phone, fax, e-mail, address)
- Change in program name
- Significant change in organizational structure
  - Program merges
- Addition of branch locations or community sites where education is provided

### **Onsite audits**

All accredited DSME programs will be subject to selection for an onsite audit annually, using a random process. Five percent of all DEAP accredited programs, with a minimum of 44, up to 70 programs will be chosen on an annual basis.

- If a program is selected for an onsite audit the program coordinator will be notified within ten working days prior to the audit date by email notification.
- The notification will include an overview of what the on-site audit will entail. The following information will need to be ready for review:
  - A Program Binder with all your supporting documentation ready for review broken down by Standard.
  - Five de-identified charts ready for the auditor to review to ensure all DSMT documentation is in place as required by the National Standards for Diabetes Self-Management Education and Support. The program will be given the Education Record Review form that will help them pull their charts together and should identify for the auditor where to find each item from the Education Record Review in the charts, either by listing the page number, or by placing a sticker or arrow or by highlighting the information.
  - Most recent aggregate outcomes data on the AADE7 Self-Care Behaviors and any clinical outcomes they are tracking.
  - The program is to have a room or area that is private so the auditor can review the binder and the charts privately.
- One auditor shall conduct the review process, which will begin with an interview with the coordinator and instructional staff.
  - The primary function of the auditors is to collect information related to NSDSMES compliance and this will be done by using the following methods:

- Interviews with staff
  - Participant record review (minimum of five – charts should represent all program components)
  - Other evidence to validate information provided at the time of application or re-application and that substantiates compliance with the NSDSMES
  - Auditors will use AADE Auditor Checklist and the Education Record Review
- Auditors will not make compliance decisions during the onsite audit.
- Auditors will be in communication throughout the visit and report any discrepancies of data to allow DSMT program staff the opportunity to present and/or explain any missing or discrepant materials or information.
- Auditors will report their findings to AADE staff, and submit onsite audit documentation tools within ten working days.
- A compliance decision will be made by AADE with input from the Volunteer Auditor
  - Decision-making will be based upon criteria outlined in *Policy 3: Decision-Making Process* and the verification of information provided during initial application, reapplication processes, and *Change of Status* and *Annual Status Report* forms.
- If no change in accreditation status is decided, the program coordinator is notified by email.
- If deficiencies are noted, then the Deficiency Notification and Corrective Action process will ensue.

# RANDOM ON-SITE AUDIT PROCESS

