

Standard 2 Stakeholder Input

This is an outline of the components to include in your application and binder for Standard 2.

1. A documented Policy outlining the process for seeking stakeholder input
 - a. Can be completed by phone, survey, online meeting service, email or face-to-face
 - b. Should be scheduled to occur within the first 6 months after accreditation and at least annually, ideally 1-2 months prior to due date for Annual Status report
2. Your policy should have a list of committed stakeholders with names and roles, and whether they are internal or external (should have at least one external stakeholder)
 - a. Should be representative of the community where the services are provided, such as DSMES participants, referring providers, health clubs, churches, other healthcare professionals within and outside of program, someone from the local American Diabetes Association chapter or local JDRF chapter, local specialist such as dietitian, podiatrist, or other community partner
 - b. Stakeholders' role is to provide input for ideas to help promote value, quality, access, increased utilization and sustainability
3. Need written documentation of outreach to and input from stakeholders
 - a. Minutes of stakeholder meeting(s) should show what you presented to stakeholders, including program data and outcomes (behavioral, clinical) (suggest creating template for minutes to submit with application)
 - b. Minutes need to show stakeholder input on services and outcomes, including results of continuous quality improvement (CQI) project and new CQI project plan for the coming year
 - i. If stakeholders are not providing input, solicit it and document
 - ii. Any stakeholders who are not present for the meeting should be reached out to for input after the meeting