

Standard 10 Quality Improvement

The components of this standard include:

1. Evidence of a procedure to collect and aggregate data for analysis of clinical, behavioral and process outcomes.
 - a. Examples of process outcomes: wait times, program attrition, referrals, education process, reimbursement issues, follow up
 - b. Examples of clinical outcomes: A1c, foot and eye exams, ER visits newborn weight, C-section delivery rate, hospitalization days
 - c. Examples of behavioral outcomes: participant satisfaction, behavioral goal achievement reduction in diabetes distress
2. Documentation of a continuous quality improvement (CQI) project plan measuring the effectiveness and impact of the DSMES services that identifies areas of improvement through the evaluation of process and outcome data.
 - a. Once areas of improvement are identified, the quality coordinator determines the timelines and important milestones, including data collection, analysis, and presentation of results.
 - b. A variety of methods can be used for quality improvement initiatives, such as:
 - i. Plan Do Study Act
 - ii. Six Sigma
 - iii. Lean
 - iv. Re-AIM
 - v. Workflow mapping
 - c. Three fundamental questions should be answered by the CQI project:
 - i. What are we trying to accomplish?
 - ii. How will we know a change is an improvement?
 - iii. What changes can we make that will result in an improvement?
 - d. The CQI project should be started within the first 6 months following accreditation