VR-SFP Chapter 7: Diabetes Self-Management Education Services

Effective 7/1/23

# 7.1 Overview of Diabetes Self-Management Education Services

Diabetes self-management education is the process of developing the customer's knowledge, skills, and abilities that are necessary to manage diabetes and improve his or her health outcomes. Vocational Rehabilitation (VR) customers might require education about diabetes to address the cause of the disease. Diabetes self-management education provides adaptive techniques and/or equipment to help the customer self-manage his or her diabetes.

Assessment and teaching of blood sugar monitoring, medication delivery, and other self-care skills related to diabetes self-management require close, hands-on evaluation and training when working with individuals who are blind or visually impaired.

Diabetes self-management education services are based on the Association of Diabetes Care and Education Specialist’s 7 Self-Care Behaviors™, which are:

* healthy eating;
* being active;
* monitoring;
* taking medication;
* healthy coping;
* problem solving; and
* reducing risks.

Diabetes self-management education services are for customers who:

* are newly diagnosed;
* need surgery or a medical procedure and are at risk of further complications because of poor diabetes management;
* are unable to maintain employment because of their diabetes;
* need additional training about diabetes management after losing their sight;
* must self-manage diabetes for admittance to training programs and for full participation in training such as that offered by the Criss Cole Rehabilitation Center;
* cannot benefit from community-based educational programs; and/or
* have unique needs that cannot be met through medical providers paid through the Maximum Affordable Payment Schedule.

Any request to change a Service Definition, Process and Procedure, or Outcomes Required for Payment must be documented and approved by the VR director, using the [VR3472, Contracted Service Modification Request for Blind and Visually Impaired Services](https://www.twc.texas.gov/vocational-rehabilitation-service-forms), before the change is implemented. The approved VR3472 must be maintained in the provider’s customer case file. For more information, refer to [VR-SFP 3.4.11 Contracted Services Modification Request.](https://www.twc.texas.gov/standards-manual/vr-sfp-chapter-03#s3411)

# 7.2 Staff Qualifications and Training

Before any services are provided, the service provider director must approve the [VR3455, Provider Staff Information form](https://www.twc.texas.gov/vocational-rehabilitation-service-forms), completed by staff such as a trainer and aides, and submit the approved form to the provider's assigned contract manager and assigned regional program specialist. The VR3455 documents the provider's qualifications and provides evidence of meeting those qualifications by providing the:

* provider’s staff résumé demonstrating diabetes education experience as an essential function of the job; and
* documentation of required continuing education hours on diabetes education topics.

## 7.2.1 Diabetes Educators

A diabetes educator must have the following criteria::

* at least one year of paid experience or two years of documented voluntary experience providing diabetes education as an essential function of the job or responsibilities while holding a current, active, unrestricted license in Texas as one of the following:
  + A clinical psychologist;
  + A Licensed Professional Counselor (LPC);
  + An occupational therapist;
  + An optometrist;
  + A pharmacist;
  + A physical therapist (PT);
  + A physician (MD or DO);
  + A podiatrist;
  + A registered nurse (RN) (includes nurse practitioners and clinical nurse specialists);
  + A dietitian or dietitian nutritionist holding active registration with the Commission on Dietetic Registration (CDR);
  + A physician assistant (PA) holding active registration with the National Commission on Certification of Physician Assistants (NCCPA);
  + An exercise physiologist holding active certification as an American College of Sports Medicine Certified Clinical Exercise Physiologist (ACSM-CEP®);
  + A health educator holding active certification as a Master Certified Health Education Specialist (MCHES®) from the National Commission for Health Education Credentialing (NCHEC);
  + A health professional with a minimum of a master’s degree in social work;
  + A certified diabetes care and education specialist (CDCES); or
  + A holder of the Board Certified – Advanced Diabetes Management (BC-ADM) credential;
* 15 hours of continuing education units (CEUs) within the 12 months immediately preceding the application for contract and/or the submission of the individual VR3455, Provider Staff Information Form as outlined in VR-SFP 7.2.2; and
* Completed the Texas Confidence Builders as outlined in VR-SFP 7.2.3.

**Note:** In lieu of paid diabetes education experience, evidence of two years of documented voluntary diabetes education experience will be considered. Examples of appropriate documentation include training on an evidence-based diabetes education curriculum; letters of recommendation describing the volunteer work from two individuals who oversaw the diabetes education, including the program leader; or evaluations of the diabetes education with the volunteer’s name visible and the protected information redacted.

## 7.2.2 Annual Training

The diabetes educator must maintain the qualifications in VR-SFP 7.2.1 and maintain continuing education units (CEUs) in diabetes self-management education topics from an agency approved by the diabetes educator's licensing or certifying body. The CEUs may not include the Texas Confidence Builder training.

|  |  |  |
| --- | --- | --- |
| **Diabetes Educator** | **CEUs Required** | **Frequency** |
| * + Clinical psychologist   + Occupational therapist   + Optometrist   + Pharmacist   + Physical Therapist   + Physician (MD or DO)   + Podiatrist;   + RN (includes nurse practitioners and clinical nurse specialists)   + Dietitian or dietitian nutritionist holding active registration with the CDR   + PA holding active registration with the NCCPA   + Exercise physiologist holding active certification as an ACSM-CEP®   + Health educator holding active certification as an MCHES® from the NCHEC   + A health professional with a minimum of a master’s degree in social work | 15 | * Within the 12 months immediately preceding the application for contract and/or submission of the individual’s VR3455, Provider Staff Information Form; and * 15 hours every 2 years beginning on the date the contract is awarded |
| * CDCES * BC-ADM | 10 | Within the 12 months immediately preceding the contract date and an additional 10 hours every two years beginning on the date the contract is awarded |

…

# 7.4 Diabetes Skills Training

## 7.4.1 Diabetes Skills Training Service Description

Diabetes skills training is provided by a diabetes educator who instructs and counsels the customer and family by means of individual and/or group skills training sessions that have been authorized by means of a service authorization.

Initial Diabetes skills training is provided in person with the trainer and customer at the same location and covers the following topics:

* Equipment training (whether purchased by TWC or using comparable benefits)
* The first hour of healthy eating
* The first hour of discussing patterns and trends
* The first half hour of being active
* The first quarter hour of foot care

The initial diabetes skills training may be provided remotely only with [VR3472, Contracted Service Modification Request](https://www.twc.texas.gov/vocational-rehabilitation-service-forms) approved by the VR director before services begin. Remote services must follow [VR-SFP 3.4.8 Remote Service Delivery](https://www.twc.texas.gov/standards-manual/vr-sfp-chapter-03#s348).

After initial diabetes skills training is provided, additional teaching for review or reinforcement may be completed in person, by phone, or by video conference. Training topics may include the following:

* Introduction to diabetes or prediabetes
* Healthy coping
* Taking medication
* Reducing risk
* Problem solving

Any request to change a Service Definition, Process and Procedure, or Outcomes Required for Payment must be documented and approved by the VR director, using the [VR3472, Contracted Service Modification Request for Blind and Visually Impaired Services](https://www.twc.texas.gov/vocational-rehabilitation-service-forms), before the change is implemented. The approved VR3472 must be maintained in the provider’s customer case file. For more information, refer to [VR-SFP 3.4.11 Contracted Services Modification Request](https://www.twc.texas.gov/standards-manual/vr-sfp-chapter-03#s3411).

For information on acceptable signatures refer to VR-SFP sections [3.2.14 Documentation](https://www.twc.texas.gov/standards-manual/vr-sfp-chapter-03#s3214) and [3.2.16 Signatures](https://www.twc.texas.gov/standards-manual/vr-sfp-chapter-03#s3216).

Diabetes skills training is intended to:

* provide self-management education;
* identify best methods for managing diabetes medication(s); and
* help the customer identify barriers, solve problems, and develop coping skills to achieve effective self-care and behavior changes.

Diabetes skills training helps customers set goals and make effective health and care decisions that fit their values and lifestyles. Diabetes educators help customers:

* develop a plan to improve their health;
* develop goals through individualized problem solving;
* provide motivation; and
* incorporate health recommendations into daily life.

The number of training hours recommended for individual diabetes self-management is based on:

* the initial assessment; and
* the topics covered that are related to the customer's vocational goals.

Up to 12 hours of skills training for diabetes self-management can be provided:

* individually;
* in a group of two to eight customers; or
* as a combination of one-on-one and group training sessions

Diabetes educators are reimbursed only for the time spent teaching customers. Trainers are not reimbursed for:

* planning time, such as attending meetings or talking with VR staff; or
* time spent completing and submitting the required paperwork.

## 7.4.2 Process and Procedure

The VR counselor or the Independent Living Services for Older Individuals Who Are Blind (ILS-OIB) worker submits a referral and issues service authorizations for diabetes skills training.

The diabetes educator must divide all diabetes skills training into one to two-hour segments to ensure that the segments do not fatigue the customer and consequently reduce the benefit of the skills training. If a segment is less than two hours, the provider must document on the VR2884, in the Observations and Comments section how this meets the customer’s individual needs.

The diabetes educator helps the customer develop specific, measurable, achievable, realistic, and timely (SMART) goals.

A new behavior-change goal should be set at each visit between the educator and the customer and achievements evaluated at the next visit. The diabetes educator helps the customer overcome barriers to success and employ problem-solving strategies.

It is recommended that the diabetes educator use adaptive equipment and disposable supplies for demonstration during training such as:

* a talking blood-glucose meter;
* an insulin measuring device, such as Count-A-Dose, that allows a blind or vision-impaired individual with diabetes to fill an insulin syringe without assistance;
* a syringe magnifier;
* a portion-control plate, such as Meal Measure;
* an insulin pen (or other injectable device for demonstration purposes);
* a talking blood pressure monitor; and
* disposable supplies such as test strips, syringes, and insulin.

The diabetes educator documents the provision of education materials, resources, and referrals on [VR2884, Diabetes Self-Management Educator Notes](https://www.twc.texas.gov/vocational-rehabilitation-service-forms).

The VR counselor or the ILS-OIB worker is responsible for approving the purchase of the recommended equipment or supplies. Documentation should identify:

* what was taught;
* what the customer gained from the instruction; and
* any barriers or gaps in knowledge.

If the customer is unable to participate in skills training on diabetes self-management because of his or her health, the diabetes educator must inform the VR counselor by email, paper mail, or fax within three business days. The diabetes educator must document such notification in the customer's file.

…