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## New era of diabetes education

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Diabetes education has evolved to be evidence-based, learner focused self-management education and support (DSME/S). The provision of DSME/S by appropriately skilled and prepared healthcare providers improves clinical care outcomes. The approaches for effectively empowering and engaging a person with diabetes can be incorporated throughout the whole chronic disease management process. Group education of DSME/S is delivering effective behavioral and clinical outcomes. The DSME/S as a program includes ten standards of care that include internal structure, external input, access, program coordination, instructional staff, curriculum, individualization, ongoing support, patient progress and quality improvement. Standards of medical care in diabetes indicate the need that all individuals with diabetes receive DSME at diagnosis and as needed thereafter. DSME improves hemoglobin A1C by as much as 1% in people with type-2 diabetes. Medicare reimbursable DSME is provided as part of the National Standards with the Education Recognized Program (ERP) or Diabetes Education Accreditation Program (DEAP). The way we educate patients' needs to meet ADA or DEAP recognition criteria for a complete DSME curriculum and support standard six of the National Standard and be delivered with group education within 10 hours upon a year of diagnosis. Therefore, the outcomes of diabetes educators depend on the methods and frequency of diabetes education provided.

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