

DIABETES EDUCATOR NETWORK HANDBOOK

DISCOVERY HEALTH 2024





Background

A diabetes educator is an integral part of the diabetes care team. From 2023, members who are registered for diabetes will have access to two consultations per year with a diabetes educator. This will be funded from their Prescribed Minimum Benefits (PMB) basket of care.

There is no formal accreditation/certification process for a diabetes educator in South Africa. Discovery Health is creating an internal network for diabetes educators to support our members and give them access to quality diabetes education, in addition to the care received from their primary treating provider.

Eligibility

Criteria

DESCRIPTORS	ELIGIBILITY CRITERIA	
Section A: Profession	Registered nurse working in any one of these registered BHF practices: 088 Registered Nurse 080 Nursing Agency 060 Pharmacy clinic - <u>Diabetes Educator registration form</u>	
Section B: Qualification	Registered nurse to complete at least one of the following: Centre for Diabetes and Endocrinology (CDE) – Core Principles Diabetes Education Society of South Africa (DESSA) – Basic Course for Health Professionals International Diabetes Federation (IDF) qualification consisting of the following courses: Diabetes Educators Prevention of Type 2 Diabetes Diabetes and CVD (cardiovascular diseases) Postgraduate qualification: Postgraduate Diploma in Diabetes Master's Degree in Diabetes	
Section C: Experience	Registered nurse to have all the following: • 2 years' professional experience as a registered nurse • 1,000 practical hours of diabetes education (6 months full-time) • 6-month mentorship with a diabetes educator.	

Experience

1,000 hours

The 1,000 hours of practice includes any diabetes education, support and management of people living with diabetes. Practical hours can be accumulated upon completing a diabetes educator course.

Definition of practice hours

Practice hours are defined as any normal work-related practice, whether clinical or managerial, as well as additional course modules that are directly related to diabetes education, support and management. Providing health care support or education to anyone who is not registered for diabetes does not qualify for practical hours.

Logging practice hours

All practical hours should be logged on the *Diabetes Educator Activity* record template.



Example of log entries:

PLACE OF SERVICE/ACTIVITY	DATE OF SERVICE/ACTIVITY	TOTAL HOURS	DESCRIPTION
Pharmacy clinic name	4 – 9 Sept. 2022	20	Medication review for 20 clients, including writing a report for the referring practitioner
Nurse agency name	12 Sept. 2022	1	Education on diabetes and diabetes-related care and management to staff working in the pharmacy
Practice name	18 – 21 Sept. 2022	10	Diabetes educator sessions, including five foot screenings

Mentorship

Mentorship assists new diabetes educators with the transition to their role in diabetes education. It promotes learning and the development of skills. Mentors can provide support and advice for mentees about understanding and following guidelines and evaluating service delivery against expected outcomes. Mentees can discuss with their mentor the difficulties they may have with implementation. The more experienced mentors can discuss solutions and advise on modification if appropriate. Mentoring helps the mentee to develop confidence, skills and judgment. It can lessen the professional isolation experienced by many specialist allied health and nursing professionals¹.

Who can be a mentor?

Any diabetes educator in the Discovery Diabetes Educator Network or a diabetologist in the Discovery Care Coordination Network (DCCN).

Duration of the mentor-mentee relationship

The mentoring partnership should be active for at least six months.

What should the mentoring include?

- The interactions can be:
 - Face-to-face meetings
 - o Phone calls
 - o Emails
 - o Virtual meetings (on Microsoft Teams, Zoom, etc).
- It should consist of at least one hour per month.

Completing the mentorship

Upon completion of the six months, the mentor should complete the *Diabetes Educator Mentorship form* and the mentee must submit this form with their application to join the Discovery Diabetes Educator Network.

Networks

There are two networks for diabetes educators, depending on which criteria they meet in the table above.

NETWORK NAME	DESCRIPTION
Diabetes Educator-in- Training Network	The diabetes educator has the necessary qualifications (section A + B) but lacks the full experience requirement (section C).
Diabetes Educator Network	The diabetes educator has the necessary qualifications and has submitted proof of the required experience (sections A, B and C).

DIABETES EDUCATOR NETWORK HANDBOOK

¹ Australian Diabetes Educator Association



Diabetes Clinic Network for group practices and pharmacies

Diabetes educators can practice through independent or group practices or be employed by a pharmacy. Pharmacies, nursing agencies or practices that have existing agreements with a Discovery Health may register their diabetes educators by applying to join the Diabetes Clinic Network. Once we have received the agreement and have registered the employer practice on the Diabetes Clinic Network, the pharmacy/group practice will appear as a provider for diabetes education on our *Find a healthcare provider* tool.

How to enrol on the Diabetes Clinic Network

- For nursing practices complete the *Nurse agreement*
- For pharmacies complete the <u>Diabetes Clinic Network Agreement</u>.

NETWORK	INSTRUCTIONS
1.Diabetes Clinic Network (employer)	Please ensure the Diabetes Nurse Educator's BHF number is registered by Discovery Health. If not yet registered, please complete the appropriate practice registration form for registered nurse working in any one of these registered BHF practices as diabetes educator • 088 Registered Nurse practice (self-employed) – Nurse practice registration form • 080 Nursing Agency – Nurse practice registration form • 060 Pharmacy clinic - Diabetes Educator in pharmacy registration form
2. Diabetes Educator-in-Training	
Network	Submit copies of the following documents together with the signed agreement to Provider Administration@discovery.co.za: Proof of BHF registration Certified copy of the Identity Document. Copy of Certificate of valid registration with the South African Nursing Council or the Health Professions Council of South Africa Copy the certificate of completion of required diabetes educator qualification (section B) The turnaround time for feedback on the application is three to five working days.
3. Diabetes Educator Network	Submit copies of the following documents together with the signed agreement to Provider Administration@discovery.co.za: Proof of BHF registration Certified copy of the Identity Document Copy of Certificate of valid registration with the South African Nursing Council or the Health Professions Council of South Africa Copy of Certificate of completion of required diabetes educator qualification (section B) Mentorship confirmation form. Log of diabetes education counselling hours. Use the Activity record.

Services

The results obtained in the pharmacy need to be made available to the treating doctor and to Discovery Health on HealthID 2.0 once available.

The turnaround time for feedback on the application is 3 – 5 working days.



Diabetes Educator codes and rates

PROCEDURE CODE	DESCRIPTION FOR DIABETES EDUCATOR
DEDU1	Diabetes education session (for the Diabetes Educator Network)
DFSC1	Diabetes foot screening
PROCEDURE CODE	DESCRIPTION FOR DIABETES EDUCATOR-IN-TRAINING
DEDUT	Diabetes education session (for the Diabetes Educator-in-training Network)

Please note: The phlebotomy fee is included in the diabetes education session which aligns with a nurse consultation 88001.

Point of care pathology codes and rates table

- Point of care pathology codes *for finger prick* tests are only payable in the pharmacy when the tests are *requested and referred by the treating doctor* and the doctor is indicated on the claim *as the referring provider*.
- Pathology codes are only payable when a point-of-care (POC) device is used that has been approved by Discovery Health. Approval is given based on Health Technology Assessment outcomes. Approved devices can be confirmed by the supplier.
- The below codes are for monitoring purposes only.
- The results from the POC tests need to be uploaded onto HealthID once this functionality is available. The results will then be visible to the treating provider and Discovery Health.

DESCRIPTION OF SERVICES	TARIFF CODE
HbA1C	4064
Serum creatinine	4032
Triglyceride	4147
Cholesterol total	4027
HDL cholesterol	4028
LDL cholesterol (Payment only for chemical determination by pathology laboratory)	No Code
U&E: Sodium + potassium + chloride + CO ₂ + urea	4171
Urine dipstick, per stick (irrespective of the number of tests on stick)	4188
Urine creatinine	4221
Creatinine clearance	4223
Micro Albumin: Quantitative	4261
Micro Albumin: Qualitative	4262

^{*}Visit <u>www.discovery.co.za</u> for the latest rates.

Diabetes educator consultation service level agreement

- 1. Although they are not time based, each consultation should last a minimum of 30 minutes.
- 2. It is important to engage with the broader care team, where appropriate.
- 3. Members should be referred back to their treating provider as their primary doctor for all chronic care.
- 4. Queries and escalations from members should be raised through the servicing communication channels provided.
- 5. Consultation topics should be individualised to the member and should include self-care behaviours.
- 6. Log the results on HealthID2.0 when available

DIABETES EDUCATOR NETWORK HANDBOOK



Eligible Schemes

The services are for members who have been registered on the Chronic Illness Benefit for type 1 or 2 diabetes mellitus. This includes Discovery Health Medical Scheme members and members of the below schemes that Discovery Health administer:

- BMW Employees Medical Aid Society
- Engen Medical Benefit Fund (EMBF)
- Glencore Medical Scheme
- LA Health Medical Scheme
- LIBCARE Medical Scheme
- Lonmin Medical Scheme
- Malcor Medical Aid Scheme
- M-Med Option of the MultiChoice Medical Aid Scheme
- Netcare Medical Scheme
- Remedi Medical Aid Scheme
- Retail Medical Scheme
- TFG Medical Aid Scheme (TFGMAS)
- Tsogo Sun Group Medical Scheme
- UKZN Medical Scheme

Bankmed Medical Aid Scheme do not yet participate.

Important note: Members with Centre for Diabetes and Endocrinology (CDE) or on a capitated Diabetes Care Programme do not have access to this benefit as it is already part of their programme.

How to claim

Normal claims processes apply.

Important note

Claims systems should be set up with the:

- Employer's BHF practice (Pharmacy, nurse agency or registered nurse private practice) as the billing provider
- Diabetes educator's own BHF practice number as the treating healthcare provider

You can always contact your software provider for assistance.

CODES	REASON	EXPLANATION
92	Claim paid as part of main procedure.	We do not allow diabetes related NAPPI consumables to be claimed with diabetes procedure codes. If not diabetes related, submit another claim separately.
123	Claim not paid. Incorrect code billed.	Diabetes Educator incorrectly claimed the code used by a diabetes educator- in-training. Use DEDU1.
123	Claim not paid. Incorrect code billed.	Diabetes Educator-in-training incorrectly claimed the code used by an educator in training. Use DEDUT
344	Paid this service at our agreed rates	Provider billed above Discovery Health agreed rate. Correct the rate.
355	Did not use network provider	The pharmacy/nurse agency/registered nurse private practice is not contracted with Discovery Health for diabetes services and does not participate in the Diabetes Clinic Network
355	Did not use network provider	The diabetes educator submitting the claim is not registered in the Diabetes Educator Network.
389	Not a service for this provider type.	Dietician Diabetes Educators are not allowed to bill point of care pathology codes. Service is out of scope.
569	Chronic condition not approved, not paid	The member is not registered for diabetes on the Chronic Illness Benefit



CODES	REASON	EXPLANATION
573	Limit for chronic meds and tests reached	The limit of one foot screen per year for this registered CIB member has been depleted.
573	Limit for chronic meds and tests reached	The limit of two education sessions per year for this registered CIB member has been depleted.
728	No referring provider	Pathology codes are only payable when the tests are requested and referred by the treating doctor and indicated on the claim.
743	Not a service for this provider type.	Dietician Diabetes Educator is not allowed to bill the foot screening code. Service is out of scope.
743	Only certain providers to claim for this	Diabetes Educator-in-training is not allowed to bill the foot screening code. Service is out of scope.
746	Not paid, member to use CDE for service	Member is registered at Centre for Diabetes and Endocrinology for diabetes educator sessions.
1196	Not paid, member to use DCC for service.	Member is registered at Discovery Care Coordination Network for diabetes educator sessions
728	Referring doctor not authorised to refer	Pathology codes are only payable when the tests are requested and referred by the treating doctor and indicated on the claim.

- Pathology laboratory referral <u>form</u>.
- When clinically required, nurses are eligible to refer the patient for pathology laboratory testing. The nurse needs to add her own **nurse practice number** as the referring provider for the pathology claim to pay.

Contact us

TYPE OF QUERY	CENTRE	CONTACT DETAILS
Remittance advices and payment run	Health provider call centre	0860 44 55 66 or healthpartnerinfo@discovery.co.za
Updating contact details	Provider administration	Provider_Administration@discovery.co.za
Joining the network	Provider administration	Provider Administration@discovery.co.za
Documents	Website	 Diabetes Educator Network Agreement (solus and group practices) Diabetes Clinic Network Agreement (pharmacies) Diabetes Educator Activity record. Mentorship confirmation form. Diabetic foot screening form. Pathology referral form.
Reporting fraud	Fraud hotline	0800 004 500 or 0800 007 788 (fax) or discovery@tip-offs.com



Diabetes education consultation guidelines

Relevant topics could include the following:

Assessment

- Glucose readings & interpretation
- Body metrics body mass index and waist circumference (weight, blood pressure and pulse)
- Medication adherence
- Barriers to good glucose control
- Injection techniques and site rotation (where applicable) (storage of insulin, frequency of changing needles, mixing of cloudy insulins and lipohypertrophy)
- Foot screening
- Smoking and alcohol

Patient education

- Importance of glucose control (diabetes complications)
- Hypoglycaemia and hyperglycaemia: causes, symptoms, prevention, treatment
- Home glucose monitoring and interpreting the results (targets, the significance of the HbA1c reading)
- Nutrition (diabetes portion plate)
- Exercise (type 1 and type 2)
- Driving and diabetes
- Pregnancy and diabetes
- Travelling and diabetes

Goal setting

• SMART goals and targets (specific, measurable, achievable, relevant, time-bound)

Appropriate referrals to the broader care team

- Primary treating doctor
- Podiatrist
- Dietitian
- Biokineticist

How to refer (once the profile is active)

The diabetes educator is an integral part of the diabetes care team and appropriate referrals to other members of the care team are encouraged. These referrals are facilitated through the HealthID platform.

Resources

Discovery Diabetes education consultation

- Diabetic foot screening <u>form</u>.
- Pathology laboratory referral *form*.
- Only when clinically required, nurses are eligible to refer the patient for pathology laboratory testing. The nurse needs to add her own nurse practice number as the referring provider before the claim will pays.
- The pharmacy nurse, when requested by the doctor that as sent the patient for diabetes
 education, may perform point of care finger prick tests in the pharmacy. This will be considered
 for payment only when the referring doctor has been added to the claim.

Discovery website

- Each eligible scheme has a diabetes care webpage, which includes the following:
 - Benefit information
 - Member stories
 - Provider stories
 - Downloadable resources (health management calendar, questions to ask your healthcare professionals).
- Content from Mayo Clinic on Connected Care
- Discovery Health Medical Scheme members have access to:



	DiabetesTeam, an <u>online patient community</u>
	o Discovery Mental health information hub
	o <u>Diabetes Care Programme page</u> on the Discovery website
External	1. International Diabetes Federation (IDF): https://idf.org/
	2. Foundation of European Nurses in Diabetes (FEND): Their 2021 conference is available online at https://www.fend.org/conference/conference-archives/presentations-2021/
	3. The 'South Africans with Diabetes' podcast on Spotify

Foot education (SEMSDA guidelines)

Strategies to prevent foot ulcers and amputation

- Education of patient, family and healthcare providers
- Appropriate footwear
- Regular inspection and examination to identify the foot at risk
- Appropriate and timely referral

Patient education: Do's and don'ts for the foot at risk

Do's

- Inspect your feet daily, including the areas between the toes.
- Ask someone else to inspect your feet if your vision is poor.
- Wash your feet daily.
- Dry your feet carefully, especially between the toes.
- Test the water temperature with your hand, not your foot.
- Inspect and feel the inside of your shoes daily.
- Moisten dry or cracked feet daily by applying oils or creams.
- Change your socks or stockings daily.
- Clip your nails straight across.
- Insist that your doctor or nurse examine your bare feet.
- Notify your doctor or nurse at once if you have a blister, cut, scratch or sore.

Don'ts

- Do not let your feet soak in standing water or foot spas.
- Do not walk barefoot.
- Do not wear shoes without socks.
- Do not use chemicals or plasters to remove corns and calluses.
- Do not cut corns and calluses yourself.
- Do not apply moisturising oils or creams between your toes.
- Do not treat your own feet (e.g. clipping nails) if your vision is poor.
- Do not use hot water bottles or heaters near your feet.

Appropriate footwear

Inappropriate footwear is a major preventable cause of ulceration. Patients with normal protective sensation can select off-the-shelf footwear. Patients with neuropathy, ischaemia or deformities need extra care with footwear.

- The shoe should not be too tight or too loose.
- Internal shoe length should be 1 to 2 cm longer than the foot.
- Internal shoe width should be equal to the width of the foot.
- Toe height should allow enough room for the toes.
- Fitting must be evaluated with the patient standing.
- Refer to an orthotist (for special footwear) if:
 - o Fitting is too tight due to deformities
 - o There are signs of abnormal loading (hyperaemia, callus, ulceration).



Examination of the foot for protective sensation using the 10-g Semmes-Weinstein monofilament

- 1. Apply the filament on the patient's hand so that they know what to expect.
- 2. The patient must not be able to see if and where the filament is applied.
- 3. Three sites must be tested on each foot.
- 4. Apply the monofilament perpendicular to the skin surface with sufficient force to cause the filament to buckle against the skin for no more than 2 seconds. Do not allow the filament to slide across the skin and do not probe repetitively at the test site.
- 5. Ask the patient IF (yes/no) and WHERE (left/right) they feel the pressure.
- 6. Perform this twice at the same site, but also perform at least one 'sham' application in which no filament is applied (a total of three questions per site).

Protective sensation is absent with two out of three incorrect answers at any one site. The patient is then considered to be at risk for ulceration. Additional information may be obtained by assessing vibration sense (128 Hz tuning fork), ankle reflexes, pain sensation (pinprick) and light touch (cotton wool).

References

- Australian Diabetes Educators Association: https://www.adea.com.au/credentialling/initial-credentialling/1000-hours-of-practice-in-diabetes-education/
- Screening for the high-risk diabetic foot: A 60-second tool (2012), by R.G. Sibbald: https://journals.lww.com/aswcjournal/fulltext/2012/10000/screening for the high risk diabetic foot a.9.aspx
- SEMDSA Diabetes footcare guidelines for primary healthcare professionals: https://docs.mymembership.co.za/docmanager/d7a3ded1-2f30-4ff2-b566-b69abe5d7a8e/00150686.pdf