

201 KAR 45:160. Scope of practice.

RELATES TO: KRS 309.331, 309.339

STATUTORY AUTHORITY: KRS 309.331

NECESSITY, FUNCTION AND CONFORMITY: KRS 309.331 requires the board to promulgate administrative regulations for the administration and enforcement of KRS 309.325 to 309.339. This administrative regulation establishes the functions that a diabetes educator may perform.

Section 1. A person holding a license or a permit from the board may perform the following functions:

(1) Provide education and support for people with diabetes, people at risk for diabetes, and caregivers of those with diabetes;

(2) Communicate and coordinate with other health care professionals to provide education and support for people with diabetes, people at risk for diabetes, and caregivers of those with diabetes;

(3) Provide diabetes self-management services, including activities that assist a person in implementing and sustaining the behaviors needed to manage diabetes on an ongoing basis;

(4) Determine the persons to whom diabetes education and services will be provided, how those education and services may be best delivered, and what resources will assist those persons;

(5) Develop a program for diabetes management, which may include:

(a) Describing the diabetes treatment process and treatment options;

(b) Incorporating nutritional management into lifestyle;

(c) Incorporating physical activity into lifestyle;

(d) Using medications safely and effectively;

(e) Monitoring blood glucose and other parameters and interpreting and using the results for self-management and decision making;

(f) Preventing, detecting, and treating acute and chronic complications of diabetes;

(g) Developing personal strategies to address psychosocial issues and concerns; or

(h) Developing personal strategies to promote health and behavior change;

(6) Develop an individualized education and support plan focused on behavior change, which shall be documented in an education or health record;

(7) Develop a personalized follow-up plan for ongoing self-management support, and communicate that follow-up plan to other health care providers as necessary;

(8) Monitor if participants are achieving their personal diabetes self-management goals and other outcomes using the following appropriate frameworks and measurement techniques:

(a) Physical activity;

(b) Healthy eating;

(c) Taking medication;

(d) Monitoring blood glucose;

(e) Diabetes self-care related problem solving;

(f) Reducing risks of acute and chronic complications of diabetes;

(g) Evaluation of the psychosocial aspects of living with diabetes; or

(9) Evaluate the effectiveness of the education and services, and engage in a systematic review of process and outcome data. (40 Ky.R. 194; 591; 791; eff. 11-1-2013.)