The Chronic Disease Self-Management Organizational Self-Assessment (CDSM-OSA) Tool

The Chronic Disease Self-Management Organizational Self-Assessment (CDSM-OSA) is designed for organizations interested in improving their services to address the needs of adults with serious and chronic health conditions. It is designed primarily as a performance improvement resource to increase an organization’s awareness of the key components of a quality Chronic Disease Self-Management approach and to engage in a self-reflective process that assists them in identifying what organizations need to keep doing, stop doing and start doing.

A comprehensive disease self-management program includes informing, engaging and guiding individuals to establish personally meaningful health goals and to acquire and apply self-management skills through education, problem solving, action step planning and implementation, regular feedback on progress and the modeling of effective self-management strategies. The inclusion of group delivered approaches have the advantage of activating individuals through modeling, feedback, collective problem solving, social networking and the hope and inspiration offered by peer support.

Using the CDSM-OSA Tool

The following is a set of CDSM practice domains and corresponding standards with a self-rating scale designed to identify current performance with respect to the best practices in disease self-management. These standards are organized into 5 key domains characteristic of high quality disease self-management programs for adults.

The self-assessment rating scale is scored from 0-4 indicating the degree to which the organization meets or doesn’t meet each standard.

0 = we don’t meet this standard at all
1 = we minimally meet this standard
2 = we partially meet this standard
3 = we mostly meet this standard
4 = we are exemplary in meeting this standard
NA= Not applicable to our organization

Organizations are encouraged to engage individuals with knowledge of organizational practices related to addressing the needs of people with chronic health conditions and invite them to complete and score the CDSM-OSA tool. In this way, organizations may assess areas of relative strength and areas for improvement. It also may be used to monitor progress on each domain and the corresponding set of standards by using the tool as a pre and post-test measure of progress.
Domain A: Knowing your population-identifying people with a serious, chronic and less than optimally managed health condition

**Standard 1:** We have a system in place to identify patients who have chronic health conditions such as diabetes, asthma, cardiovascular disease, respiratory disease, arthritis, HIV or other conditions.

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**Standard 2:** We have a system in place to identify patients with a chronic health condition that is inadequately/poorly managed.

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**Standard 3:** We have a system in place to regularly monitor specific mechanical and blood chemistry health indicators for each patient’s chronic health condition. This information enables our organization to regularly monitor the patient’s condition.

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**Standard 4:** We have a process to insure that the CDSM approach is designed to align with the clients felt needs, concerns, problems and goals that are associated with managing a chronic health condition

Prior to engagement of clients in a CDSM program clients are asked about their felt need for managing a health condition; what they hope to gain, why is it personally important to manage a chronic condition, the personally meaningful problems associated with living with a chronic health condition.

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**Domain A Total Score______**

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Domain B: Team Based Care- The approach to comprehensive disease self-management includes coordinated services delivered by a team of helpers including a primary care provider, behavioral health practitioner, psychiatrist, peer specialist, coach, nurse care manager and others.

**Standard 1:** We have a system in place that insures a coordinated and team based approach to disease self-management. The scoring identifies the number of staff involved who work as a team.

0= No system   1= only one staff   2= 2 staff   3= 3 staff   4= 4 or more staff
**Standard 2:** The team (at least 2 or more helpers) meets at least weekly to review the progress of patients with chronic health conditions.

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**Standard 3:** The helpers involved in addressing the needs of patients with chronic health conditions have a timely and accurate system in place to share information related to the patient’s condition with other key helpers.

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**Standard 4:** We have a system to review and address the impact of psychotropic medications on a person’s health condition that includes communication between the behavioral health prescriber and the primary care provider.

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**Domain B Total Score _____**

**Domain C: Structured and systematic CDSM individual and group options**

**Standard 1: Group work:** We use a group delivered, structured, systematic and curriculum supported approach to chronic disease self-management. This includes the use of educational materials, worksheets, goal plans, action step planning, progress monitoring and other tools and resources such as peer support.

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**Standard 2: Individual work** - In individual meetings with patients we employ structured, systematic and curriculum supported approaches to chronic disease self-management. This includes the use of educational materials, worksheets, goal plans, action step planning, progress monitoring and other tools and resources such as peer support..

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**Domain C Total Score _____**
DOMAIN D: Promising Best Practices in Chronic Disease Self-Management

Standard 1: Comprehensiveness- Our individual or group service plan to assist patients with chronic disease self-management includes addressing the needs of individuals related to 3 key areas:

1. Treatment adherence and healthcare partnership,
2. Coping with the emotional reactions to chronic health conditions
3. Making critical lifestyle changes to support health

0= none of the above   1= only one area addressed   2= 2 areas addressed
3=all areas addressed   4= All areas addressed in a highly integrated and coordinated manner

Standard 2: Treatment Focused Support- Assisting people to gain the knowledge, develop skills and implement actions to address the health condition itself through the effective use of medication, diagnostic tests, monitoring of disease specific health indicators and partnership with the health care practitioner. Our approach includes the following topics (check all that apply)

☐ Communicating and working with your mental health and physical healthcare providers in a way that works for you
☐ Understanding the basics of your illness: What is it? Why is it important to manage successfully?
☐ Understanding and using medication in a way that works for you
☐ Making informed treatment decisions and solving problems

0= none of above   1= only one topic   2= only 2 topics   3= 3 topics   4= 4 topics

Standard 3: Coping with the emotional responses associated with managing a serious and chronic health condition- assisting individuals to address the cognitive and emotional factors influencing the person’s motivation, confidence and ability to fully engage in managing a chronic health condition. (check all that apply to rate performance)

☐ Understanding and coping with feelings of anger, depression, fear and emotional stress.
☐ Learning and using stress management and relaxation approaches
☐ Managing stress through the support of peers, use of meditation, relaxation and social networking.
☐ Managing fatigue, low energy, avoidance of health services

0 = none of above   1= only one topic   2= only 2 topics   3= 3 topics   4= 4 topics
Standard 4: Lifestyle changes and health promoting behavior - a focus on those health behaviors key to overall health and successful management of any chronic health condition. Lifestyle changes and health behaviors are often a critical factor in successful management of serious health conditions and include the following 4 areas:

☐ Understanding and making informed decisions about healthy eating
☐ Increasing physical activity through a variety of activities that work for you
☐ Understanding and addressing the impact of unhealthy habits and activities on your health condition (e.g., smoking, harmful use of prescribed, over the counter and street drugs.
☐ Taking small and meaningful action steps to improve health

0 = none of above  1= only one topic  2 = 2 topics  3 = 3 topics  4 = 4 topics

Domain D Total Score_____

Domain E: Wellness and healthy lifestyle support - the organization provides wellness programming opportunities designed to support individuals with chronic health conditions to acquire information, engage in wellness related activities and develop personalized plans to continue wellness activities in their living environment.

Standard 1: Exercise: Our organization has a system in place to offer individuals opportunities to engage in exercise and movement activities such as calisthenics, walking/hiking activities, swimming, dancing, yoga, physical activity on gym equipment, sports and other activities that promote healthy increase in physical movement.

0 1 2 3 4 NA

Standard 2: Healthy eating and nutrition: Our organization has a system in place to offer individuals opportunities to acquire important information about healthy eating habits and to apply their knowledge in the context of their living environment. In addition to nutritional information, the organization offers hands on learning through visits to local supermarkets, demonstrations and practice of healthy cooking techniques and healthy food choices.

0 1 2 3 4 NA

Standard 3: Cultural Alignment: The organization offers wellness activities related to exercise and eating habits that are respectful of the cultural perspectives, religious beliefs and personal preferences of the patients. This is demonstrated by the creation of personalized wellness plans aligned with the patients wants.

0 1 2 3 4 NA
Standard 4: Peer Support- The organization engages and involves peers in roles such as health coaches, personal trainers, co-leaders of wellness focused group programs and other wellness activities.

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**Domain E Total Score**

Domain F: Addressing harmful lifestyle habits and behaviors.

Standard 1: Smoking cessation- the organization offers smoking reduction/cessation supports that includes individual, group, and peer led approaches along with access to medication assisted treatments. Services are provided by staff trained in best practices in smoking cessation treatments and interventions.

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**Domain F Total Score**

Domain G: Population and patient specific data

Standard 1: Our organization has a system in place to identify sub cohorts of patients based on the type of serious and chronic health condition and demographic characteristics and to monitor progress and outcome of disease self-management efforts.

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**Domain G Total Score**
CDSM Self-Assessment Scoring Guide

Domain A Total score divided by Number of standards
Total/number =

Domain B Total score divided by Number of standards
Total/number =

Domain C Total score divided by Number of standards
Total/number =

Domain D Total score divided by Number of standards
Total/number =

Domain E Total score divided by Number of standards
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Domain F Total score divided by Number of standards
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Domain G Total score divided by Number of standards
Total/number =

CDSM Organizational Self-Assessment Graph

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