# Diabetes Care for Older Adults at Home: A National Practice Module

Caring for older adults with diabetes at home.

**Why this module matters.** About 40 million Americans have diabetes and more than half of adults 65 and older have prediabetes. For older adults, low blood sugar is one of the most dangerous and preventable risks.

## About this module

This module gives teams a shared, evidence-based approach to caring for older adults with diabetes at home. It draws on current federal rules and national guidance, and it ends with a checklist that agencies, clinicians, and families anywhere in the United States can adopt.

| Item | Details |
|---|---|
| Who it is for | Family caregivers, home care aides, nurses, and clinicians |
| Format | 6 units, case scenarios, a knowledge check, and a national checklist |
| Time | About 1.5 hours |
| How to use it | Caregivers focus on Units 3 to 5. Clinicians and agencies use all units. |

### Learning objectives

After completing this module, learners will be able to:

1. Describe diabetes in older adults nationally.
2. Explain 2026 national guidance for older adults.
3. Recognize and treat low blood sugar.
4. Recognize high blood sugar.
5. Support daily diabetes care.
6. Link diabetes with falls and dementia.

**Scope.** Aides and family caregivers observe, support, and report. Clinical assessments, medication changes, and treatment decisions belong to licensed clinicians. Follow your state scope-of-practice rules and agency policies.

## Unit 1. The national picture

| Measure | Figure | Source |
|---|---|---|
| People with diagnosed or undiagnosed diabetes | 40.1 million (2023) | CDC, 2026 |
| Adults with diabetes who do not know it | 11.0 million (27.6%) | CDC, 2026 |
| Adults 65 and older with prediabetes | 31.3 million (52.1%) | CDC, 2026 |
| Adults with prediabetes overall | 115.2 million | CDC, 2026 |

Diabetes is common in older adults, and it raises the risk of heart disease, stroke, kidney disease, vision loss, foot problems, falls, and memory problems.

## Unit 2. National guidance for older adults

The American Diabetes Association's 2026 Standards of Care set the national approach. Key points for older adults:

| Topic | 2026 guidance |
|---|---|
| Blood sugar goals | Individualized by age, frailty, and health. Less strict goals are often safer for frail older adults. |
| Simplifying treatment | A new stepwise framework for deintensifying and simplifying treatment in older adults, to reduce low blood sugar and burden |
| Continuous glucose monitors (CGM) | Recommended for adults on insulin, and for those on oral medicines that can cause low blood sugar |
| Blood pressure | Below 130/80 if achievable safely for most older adults; below 140/90 for those in poor health or at high risk of side effects |
| Protein | At least 0.8 g per kg of body weight a day to maintain muscle and function |
| Geriatric screening | Screen for memory, mood, falls, and function |

> **Personal targets.** The clinician sets each person's goals. Caregivers should know the person's own targets and what to do if readings are outside them.

## Unit 3. Low blood sugar (hypoglycemia)

Low blood sugar is one of the biggest dangers for older adults with diabetes, especially those on insulin or sulfonylureas. It can cause falls, confusion, heart problems, and hospital visits.

| Signs | What to do |
|---|---|
| Shaky, sweaty, hungry, fast heartbeat, dizzy, irritable, confused, unusual behavior | Check blood sugar if possible. If low or unsure and the person can swallow, give fast sugar (for example, 4 ounces of juice or glucose tablets), wait 15 minutes, recheck, and repeat as the plan says. Then give a snack or meal. |
| Unresponsive, seizure, or cannot swallow | Call 911. Do not give food or drink. Use glucagon if prescribed and trained. |

Report every low blood sugar episode to the nurse or clinician. Medicines may need to change.

## Unit 4. High blood sugar

| Signs | Action |
|---|---|
| Very thirsty, urinating often, tired, blurred vision | Check blood sugar; encourage water; report high readings as the plan says |
| Vomiting, unable to keep fluids down, confusion, very high readings | Call the clinician urgently or 911 |

Illness, infection, and missed medicines often cause high blood sugar. Follow the clinician's "sick day" plan.

## Unit 5. Daily care at home

| Area | What caregivers can do |
|---|---|
| Medicines | Give as prescribed; never double up after a missed dose without advice |
| Monitoring | Check and record blood sugar as directed; learn the CGM or meter |
| Meals | Regular meals; balanced plate; do not skip meals with insulin |
| Activity | Walking and strength exercises as cleared by the clinician |
| Feet | Check daily for cuts, blisters, redness; well-fitting shoes; never go barefoot; report sores |
| Skin and mouth | Keep skin clean and moist; dental care |
| Eyes and kidneys | Keep yearly eye exams and lab checks |

## Unit 6. Diabetes and other conditions

- **Falls:** low blood sugar, numb feet, and vision problems raise fall risk. Use the Fall Prevention module.
- **Dementia:** the person may forget meals or medicines and may not recognize low blood sugar. Simpler plans are often safer.
- **Heart and kidney disease:** common in diabetes; follow combined plans.
- **Depression:** common; report low mood.

## Case scenarios

### Case 1. Shaky before lunch

Mrs. S, on insulin, is sweaty and confused at 11:30 a.m. Her meter reads 58.

- What should the caregiver do?

*Discussion:* She can swallow, so give fast sugar, wait 15 minutes, recheck, repeat if still low, then a meal. Report the episode to the nurse the same day.

### Case 2. A foot sore

A caregiver sees a small blister on the bottom of Mr. T's foot. He did not feel it.

- Why is this important?

*Discussion:* Numb feet hide injuries that can become serious infections. Report it the same day.

## Knowledge check

1. How many Americans have diabetes? *(About 40.1 million)*
2. What share of adults 65+ have prediabetes? *(About 52%)*
3. Who should have a CGM under the 2026 ADA Standards? *(Adults on insulin, and on oral medicines that can cause low blood sugar)*
4. What is the first step for a conscious person with low blood sugar? *(Give fast sugar, wait 15 minutes, recheck)*
5. When do you call 911 for low blood sugar? *(Unresponsive, seizure, or cannot swallow)*
6. How often should feet be checked? *(Every day)*

# National Diabetes Care for Older Adults Checklist

This checklist turns the 2026 ADA Standards and CDC data into one tool for families, agencies, and clinicians. The "National basis" column shows where each item comes from. Adapt it to your state rules and policies.

| Name or ID | Date | Completed by and role |
|---|---|---|
| Agency or organization | Reviewed by | Next review date |

## A. Plan

| Action | National basis | Done | Notes |
|---|---|---|---|
| Personal blood sugar and blood pressure targets written in the plan | ADA 2026 | ☐ | |
| Low and high blood sugar action plan written | ADA 2026 | ☐ | |
| Sick day plan written | ADA 2026 | ☐ | |
| Treatment reviewed for simplification if frail or at risk of lows | ADA 2026 | ☐ | |
| CGM considered if on insulin or medicines that cause lows | ADA 2026 | ☐ | |

## B. Daily care

| Action | National basis | Done | Notes |
|---|---|---|---|
| Medicines given as prescribed | Best practice | ☐ | |
| Blood sugar checked and recorded as directed | ADA 2026 | ☐ | |
| Feet checked daily | ADA 2026 | ☐ | |
| Regular meals and activity | ADA 2026 | ☐ | |

## C. Report and follow up

| Action | National basis | Done | Notes |
|---|---|---|---|
| Every low blood sugar reported | ADA 2026 | ☐ | |
| Foot sores reported the same day | ADA 2026 | ☐ | |
| Yearly eye, kidney, and foot exams kept | ADA 2026 | ☐ | |
| Fall risk, memory, and mood screened | ADA 2026; CDC STEADI | ☐ | |

| Completed by: signature | Printed name and title | Date |
|---|---|---|

| Reviewed by: signature | Printed name and title | Date |
|---|---|---|

## Sources and further reading

CDC: National Diabetes Statistics at a Glance (Sept. 2026) (cdc.gov)

Diabetes on the Net: Factsheet on the ADA Standards of Care 2026 (diabetesonthenet.com)

CDC STEADI Pocket Guide (cdc.gov)

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