

National Competencies for Credentialed Diabetes Educators

2017



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ADEA National Competencies for Credentialed Diabetes Educators

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About ADEA

The Australian Diabetes Educators Association (ADEA) is the peak national organisation for multidisciplinary health professionals who are committed to the provision and excellence of quality, evidence-based diabetes education, care and management with over 2,100 members working in all sectors and across all locations.

ADEA aims to improve the health and wellbeing of people with diabetes by:

1. Assessing diabetes educators based on their qualifications, skills, knowledge and experience through the credentialling program
2. Supporting multidisciplinary health professionals through its various programs, including mentoring, education and research
3. Developing and updating relevant policies, standards of practice and clinical guidelines

For more information, visit our website at www.adea.com.au.

Key Definitions

Competency: can be defined as “the state of having the knowledge, judgement, skills, energy, experience and motivation to respond adequately to the demands of one’s professional responsibility” (1).

Competency standards: are a set of benchmarks used to assess the skills and knowledge of a person. They are used as a basis for defining learning outcomes and assessing performance within a professional practice. They specify knowledge and skill, and the application of that knowledge and skill, in the workplace.

Continuing Professional Development (CPD) is how health practitioners maintain, improve and broaden their knowledge, expertise and competence, and develop the personal and professional qualities required throughout their professional lives (2).

Scope of practice: the procedures, actions and processes in which a health professional is authorised, educated and competent to perform (3).

Standards of Practice: a framework that outlines the nationally acceptable level of practice for Credentialed Diabetes Educators in Australia (4).

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Introduction

The Australian Diabetes Educators Association (ADEA) was formed in 1981 and is the leading Australian organisation for health care professionals providing diabetes education and care.

ADEA grants status as a Credentialed Diabetes Educator (CDE) in recognition of demonstrated experience and expertise in diabetes education and commitment to professional development and ongoing learning that meet ADEA's expected standards. Recognition as a CDE is ADEA's assurance to people with or at risk of diabetes, their families, carers and health care providers that they can expect to receive quality diabetes education and advice when consulting a CDE.

Before gaining recognition as a CDE, eligible health professionals complete a post graduate certificate in diabetes education and management, 1000 hours of practice in diabetes education, a minimum six month mentoring partnership and submit a referee report from a manager or supervisor that addresses the *National Core Competencies for Credentialed Diabetes Educators*.

Since the initial development of core competencies in the late 1980s, ADEA as an organisation and CDEs as a professional group, have evolved considerably. The process, structure and expected outcomes of diabetes education has been more clearly articulated and the number of professions eligible to apply for CDE status has increased to include not only registered nurses but also other professions that are involved with the care and management of people living with diabetes.

Health professional disciplines eligible to apply for ADEA credentialed status:

- Registered Nurse (RN or Division One)
- Registered Nurse and Registered Midwife
- Accredited Practising Dietitian
- Registered Medical Practitioner
- Registered Pharmacist
- Registered Podiatrist
- Accredited Exercise Physiologist
- Registered Physiotherapist
- Direct Entry Midwife

Under the guidance of expert members in the Competency Working Group the *National Core Competencies* document has undergone a major review. This review encompassed a progression from 'novice to expert' as outlined by Dreyfus and Dreyfus (5) and Benner (6), and utilised by other health professional organisations (7) (8), and was a more useful and practical model, providing for CDEs that come to their roles with a variety of experiences and skills.

NOTE:

This document outlines the minimum competencies expected of all CDEs regardless of their primary discipline as well as describing more advanced levels of competency expected of CDEs as they grow and develop in their role as diabetes educators.

Key aims of this document

The key aims of this document are to:

- define the minimum competencies required of CDEs
- provide an outcomes oriented guide for tertiary institutions to demonstrate competence in entry level diabetes self-management education courses accredited by ADEA
- provide health practitioners, seeking CDE status with a framework for identifying their own professional development and practice needs in order to meet requirements for recognition as a CDE
- provide CDEs with a framework for continually assessing their own competence and professional development needs
- describe performance standards that consumers and employers can expect of CDEs.

What this document does not do

This document **does not** replace the professional standards and guidelines for health professional practice. The document provides guidance on the competencies required to work as a CDE.

All CDEs are required to maintain and uphold their professional standards that define practice and behaviour in addition to working within level one competencies as defined by ADEA in this document. All CDEs are required to work within their own scope(s) of practice and adhere to the all relevant legislation related to authority to practice (3).

Role and Scope of Practice of a Credentialed Diabetes Educator

The ADEA believes the role of the CDE in providing diabetes education, clinical care, research, policy development, service planning and management is essential to the future health of people with diabetes, people at risk of diabetes and the wider community (4).

CDEs use a range of specialised knowledge and skills to promote optimal health and wellbeing. They integrate diabetes self-management education with clinical care as part of a therapeutic intervention to promote physical, social, spiritual and psychological wellbeing.

CDEs are required to adopt a person centred approach when providing diabetes self-management education to those living with diabetes to:

- develop the knowledge, skills and confidence for the everyday management of their diabetes
- understand their personal health risks
- explore the meaning and implications of these risks in the context of personal, social and cultural influences and in terms of current lifestyle behaviours
- developing and understanding a comprehensive self-management plan that will maximise their health outcomes (3).

Core Competency Domains for Credentialed Diabetes Educators

Diabetes education and management is a specialist area of practice. All CDEs, regardless of their primary discipline, have common minimum competencies they must maintain in order to work as a CDE and they must maintain knowledge and competence to work in their role at a specialist level.

CDEs work in a variety of practice settings across the intervention and care continuum. A CDE's practice is underpinned by a core body of knowledge, skills and activity in the following five domains:

- Clinical Practice
- Education and Counselling
- Research and Quality Improvement
- Management and Administration
- Leadership and Advocacy

CDEs have a professional responsibility to ensure they acquire and maintain the requisite knowledge and competence to enable them to perform their role safely, effectively and in a manner that supports optimal outcomes for all people with or at risk of developing diabetes.

To be credentialed and to maintain credentialing status annually, CDEs must demonstrate how they:

- apply knowledge of best practice treatment, management and care of people with prediabetes and diabetes (domain 1)
- apply evidence based education and self-management skills, interventions and techniques to improve outcomes for people with prediabetes and diabetes (domain 2)
- contribute to research and quality improvement to build the evidence base to support improvements in self-management of prediabetes and diabetes education and care (domain 3)
- apply principles of program and/or business management to contribute to the safe, effective and efficient delivery of diabetes services that support successful self-management of prediabetes and diabetes (domain 4)
- provide expertise and leadership within the health profession and advocate for best practice diabetes care for all people living with prediabetes and diabetes (domain 5).

Competency Domains and Core Skills, Knowledge and Values

Under each of the five domains of competency there is a list of skills, knowledge and values that make up the competency. These are considered the base core skills, knowledge or values (Level 1 competency) of all CDEs, regardless of their scope of practice. All CDEs must endeavour to maintain core competency under each domain of practice.

The following are the base core competencies required for a CDE to meet each of the competency domains.

Domain 1: Clinical Practice

Competency:

Credentialed Diabetes Educators (CDEs) apply knowledge of best practice treatment, management and care of people with prediabetes and diabetes.

CDEs work within an interdisciplinary team to tailor clinical interventions to the individual and to maximise the health outcomes for all people living with, or at risk of developing diabetes.

Core skills, knowledge and values

CDEs:

- apply or promote current principles of evidence based practice to the treatment, management and care of people living with prediabetes and diabetes
- provide or promote clinical care that is consistent with the regulatory framework governing the CDEs primary discipline and refers people with diabetes to other members of the interdisciplinary team to maximise outcomes
- apply or promote systematic and comprehensive person-centred care that is delivered in a culturally sensitive manner across the lifespan
- clearly articulate the differences between prediabetes, type 1 diabetes, type 2 diabetes, gestational diabetes and other types of diabetes
- clearly articulate the factors associated with the development of diabetes
- recognise and manage hypoglycaemia and hyperglycaemia
- describe the interrelationship between nutrition, exercise, stress, and medications for diabetes management
- explain how to use medicines to effectively manage diabetes
- explain the relationship between diabetes and other conditions (e.g. heart disease, kidney disease)
- explain the relationship between diabetes and microvascular disease
- explain the basic components of treatment appropriate for each type of diabetes
- explain the inter- disciplinary nature of the management and support of a person living with diabetes
- utilise clinical assessment to interpret and monitor clinical indicators of general health status and metabolic management, and accurately analyse this information to guide clinical decision making and referral.

Domain 2: Education and Counselling

Competency:

Credentialed Diabetes Educators (CDEs) apply evidence based education and self-management skills, interventions and techniques to improve outcomes for people with prediabetes and diabetes.

CDEs work within an interdisciplinary diabetes team to tailor interventions to individual self-management education needs.

Core skills, knowledge and values

CDEs:

- refer to and apply evidence based guidelines and innovative techniques to enhance communication and self-management behaviours
- demonstrate high level communication and counselling skills to facilitate informed decision making by the person with diabetes
- understand and utilise evidence based education and motivational techniques to assist with the education, behaviour change and support of people living with or at risk of developing diabetes
- utilise a person-centred approach that is cognisant of the person with diabetes/their carers' cultural, economic and social background and life stage when educating and supporting the person living with diabetes or at risk of developing diabetes
- customise programmes or interventions to accommodate the age, literacy level, cultural or ethnic background, and physical, or cognitive abilities of the person living with diabetes or at risk of developing diabetes
- apply cultural competency principles to maximise therapeutic relationships with all individuals in their care who are from different cultural backgrounds than their own
- apply problem solving techniques and a non-judgemental approach when dealing with people living with diabetes or at risk of developing diabetes.

Domain 3: Research and Quality Improvement

Competency:

Credentialed Diabetes Educators (CDEs) contribute to research and quality improvement to build the evidence base to support improvements in self-management of prediabetes and diabetes education and care.

Core skills, knowledge and values

CDEs:

- are committed to improving the quality and outcomes of treatment, management and care for people living with prediabetes and diabetes through participation in ongoing quality management
- contribute to the monitoring and evaluation of the education and care provided at the individual, program and, where possible, at the population level
- apply quality improvement principles when undertaking or contributing to quality improvement activities
- explain how research is used to develop evidence based guidelines and resources
- demonstrate basic skills in research methodology
- critically appraise research findings
- keep up to date with current research in diabetes education, management and care
- work towards translating research into clinical practice
- apply evidence based research findings to the development and review of resources, policies and procedures
- critically appraise individual knowledge, skills and work practices and develop a professional development plan to address deficiencies in these areas.

Domain 4: Management and Administration

Competency:

Credentialed Diabetes Educators (CDEs) apply principles of program and/or business management to contribute to the safe, effective and efficient delivery of diabetes services that support successful self-management of prediabetes and diabetes.

Core skills, knowledge and values:

CDEs:

- demonstrate good organisation and communication skills in order to effectively and efficiently manage a client case load
- demonstrate good liaison skills in order to effectively support people with diabetes to navigate the interdisciplinary nature of diabetes care and management
- demonstrate good written communication skills in accurately documenting and reporting interactions with clients
- explain current and emerging technologies that can be applied to diabetes education, management and support
- collaborate with the person with diabetes, the referring practitioner, and other members of the diabetes care team to establish agreed clinical targets
- efficiently and effectively coordinate care, identify unmet needs and refer or recommend referral to other health professionals as appropriate
- explain the organisational and community structures in place to effectively manage diabetes services
- explain the importance of maintaining accurate records and document clearly and precisely all aspects of relevant service delivery
- utilise and manage diabetes resources in an efficient and effective way
- provide accurate and up to date knowledge and information on the costs and subsidies available to people with diabetes
- contribute to the development of policies and procedures that support efficient diabetes service delivery.

Domain 5: Leadership and Advocacy

Competency:

Credentialed Diabetes Educators (CDEs) provide expertise and leadership within the health profession and advocate for best practice diabetes care for all people living with prediabetes and diabetes.

Core skills, knowledge and values:

CDEs:

- are committed to advocating for best practice diabetes education and care
- show leadership in the speciality field of diabetes education management and care and have the knowledge and confidence to act as a consultant and resource for colleagues, other health care providers, carers and other community members
- have the knowledge, skills and confidence to advocate for people with prediabetes and diabetes to improve their health outcomes
- seek opportunities to build capacity and educate members of the community about the prevention and management of prediabetes and diabetes
- advocate to build the capacity of the health workforce and seek opportunities to educate other health professionals about the prevention and management of prediabetes and diabetes
- understand and apply the principles of mentoring
- recognise unsafe or unprofessional practice in self or others and respond appropriately according to professional codes of practice or organisational requirements
- seek opportunities to professionally contribute to the field of diabetes education, management and care.

Level of Competency Cues and Examples

Three levels of competency are described for each domain: -

- **Level 1:** CDEs with the core basic skills and experience in area of diabetes education and management.
Note: A CDE who is functioning at the base core competency level may not automatically know what they need to do in all practice situations and may seek the support and assistance of more experienced CDEs in a particular competency area.
- **Level 2:** Experienced CDEs in the area of diabetes education and management. CDEs at this level are beginning to function at a higher autonomous level. They are more confident and proficient in that domain and they have the skills and knowledge in the area to take on a leadership role and to mentor less experienced practitioners. They may also be taking a more active involvement in research or monitoring quality of diabetes education and care within or external to the organisation they are working in.
- **Level 3:** Recognised expert and leaders in the area of diabetes education and management. These CDEs may be taking active roles in initiating research, directing policy development, analysing and reporting on outcome measures at the individual, unit, organisation and population level.

The levels of competency are a guide to assist you to rate your proficiency in all competency domains. It is not the intention of ADEA that all CDEs must progress in a linear continuum from level 1 to level 3 or to be equally proficient in all domains. Some CDEs may choose to build expertise in the clinical or educational area where others may build expertise in management or research. It is the expectation that all CDEs regardless of their primary discipline or scope of practice maintain a minimum level of competency (level 1) in all domains.

Under each level are cues or examples of what behaviours, skills or activities a person at each level would be expected to display regardless of the specialty area the CDE may be working in.

This document should be used as a tool for CDEs to guide their career as a diabetes educator and to ensure that on-going professional education and development is directed at not only maintaining the base level competencies but working towards becoming more proficient in other areas of CDE practice.

NOTE:

CDEs should reflect on each domain and the three levels of competency that are outlined in this document when setting goals and determining continuous professional development (CPD) requirements.

It may be useful to self-rate your competence against the core base level from a scale of 1- 10 so that you can identify the areas of competencies that you may like to develop. This will assist you to identify further education or training requirements as you continually work to maintain your skills.

For those working towards initial credentialling as a CDE, this exercise may be undertaken in collaboration with your mentor.

Domain 1: Clinical Practice

Competency

Credentialed Diabetes Educators (CDEs) apply knowledge of best practice treatment, management and care of people with prediabetes and diabetes.

CDEs work within an interdisciplinary team to tailor clinical interventions to the individual and to maximise the health outcomes for all people living with, or at risk of developing diabetes

Cues and examples to demonstrate each level of competency

Level 1	Level 2	Level 3
<ul style="list-style-type: none"> consults and provides education whereby the person with diabetes is the central person in the day to day management of their condition and supports clients to take an active part in its management refers to professional practice guidelines when providing clinical care explains how to use medicines to effectively manage diabetes seeks support from others in complex cases seeks to improve and maintain clinical knowledge and skills adheres to the regulatory and decision making framework within which he/she practices provides accurate information on prediabetes and all types of diabetes to clients, other health professionals and members of the community provides accurate information about the interrelationship between nutrition, exercise, stress, and medications for diabetes management accurately undertakes a clinical assessment of the person living with or at risk of developing diabetes and effectively actions on clinical indicators effectively communicates progress with other health professionals identifies the need to refer for clinical care outside their 	<ul style="list-style-type: none"> integrates professional practice guidelines when providing clinical care, and actively advocates for the use of guidelines within the diabetes team seeks to improve and maintain advanced clinical knowledge and skills appropriate to the educator's clinical role mentors and supports less experienced CDEs and other health professionals to apply best practice principles to the clinical care of people with diabetes participates in guideline and protocol development accepts delegation/referrals of clinical care according to his/her scope of practice and level of competency assists with the development of evidence based decision making frameworks takes remedial action when clinical care is not being delivered according to best practice guidelines 	<ul style="list-style-type: none"> provides expert advice to others on best practice principles for the clinical care and management of people living with diabetes and prediabetes maintains and applies advanced clinical knowledge and skills appropriate to the educator's clinical role and specialist function reviews and develops diabetes related clinical pathways to support access to quality clinical care for people with diabetes takes the lead on developing, auditing and reporting on patient-related experiences and outcome measures takes the lead on the monitoring of the clinical care provided to ensure that care delivered is consistent with the regulatory framework governing the educators clinical discipline participates in broader community /organisational committees or working parties to develop and review best practice clinical guidelines influences national policy regarding the clinical management of people with diabetes takes a lead in advocating, developing resources and

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<p>expertise and selects appropriate services</p> <ul style="list-style-type: none">• uses appropriate and validated tools to assess the needs of the person with diabetes• actively collaborates with the person with diabetes, the referring practitioner and other members of the diabetes care team to establish agreed clinical targets		<p>knowledge building activities for those who are on level 1 and 2 of their clinical practice</p> <ul style="list-style-type: none">• serves as a resource in curriculum and program development, design and evaluation
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Domain 2: Education and Counselling

Competency

Credentialed Diabetes Educators (CDEs) apply evidence based education and self-management techniques to improve outcomes for people with prediabetes and diabetes.

CDEs work within an interdisciplinary diabetes team to tailor interventions to individual self-management education needs.

Cues and examples to demonstrate each level of competency

Level 1	Level 2	Level 3
<ul style="list-style-type: none"> applies health behaviour and educational theory to inform, motivate and support a person living with diabetes throughout their lifespan assists the client to establish realistic, meaningful self-management goals and success metrics applies exploratory questioning and reflective listening techniques to enhance communication and understanding assesses the client's understanding of the relevant clinical and self-management options available to them seeks guidance from more experienced CDEs when alternative approaches may be required to support or educate the client consults and provides education whereby the person with diabetes is the central person in the day to day management of their condition and supports clients to take an active part in its management seeks feedback from the client and acts on any feedback to make changes to practice is non-judgemental and respects the choices made by the person with diabetes effectively communicates progress with other health professionals keeps up to date with digital health information, and mobile technology that promotes and enhances diabetes self-management 	<ul style="list-style-type: none"> applies a wide variety of approaches to the education and counselling of people with diabetes and is willing to change an approach as required encourages novice or less experienced CDEs to adopt evidence based and innovative approaches to foster effective diabetes self-management education and support acts as a resource for less experienced educators and other health professionals to facilitate an individualised education plan that is focused on behavioural change actively participates in the development and implementation of educational materials, supportive networks and models of diabetes care develops and delivers diabetes training programs for generalist health care providers at a variety of levels acts as a resource and provides ongoing professional development in the educator's own area of clinical expertise for other members of the interdisciplinary care team 	<ul style="list-style-type: none"> seamlessly shifts between behavioural approaches to meet evolving needs of the client apply knowledge of age-specific learning principles, health literacy and behaviour change theory to develop effective diabetes education and support programs serves as a resource in curriculum and program development, design and evaluation teaches behavioural theories and approaches to colleagues and other health professionals supports the ongoing professional development of diabetes educators and other health care professionals participates in professional organisation workgroups/committee to promote the field of diabetes education seeks advance level educational opportunities in diabetes education and management

Domain 3: Research and Quality Improvement

Competency:

Credentialed Diabetes Educators (CDEs) contribute to research and quality improvement to build the evidence base to support improvements in self- management prediabetes and diabetes education and care.

Cues and examples to demonstrate each level of competency

Level 1	Level 2	Level 3
<ul style="list-style-type: none"> actively participates in ongoing quality improvement and research activities contributes to the ongoing monitoring and evaluation of the education and clinical care provided at the individual and program level recognises unsafe and/or unprofessional practice in self and others and responds appropriately actively seeks critical appraisal of own performance from other CDEs and peers regularly critically appraises peer reviewed and relevant non-peer reviewed literature to inform and guide diabetes education and clinical management 	<ul style="list-style-type: none"> takes a lead in ongoing quality improvement by evaluating and contributing to the monitoring and evaluation of the education and clinical care provided at the individual and program level as well as contributing at a population level participates in ongoing quality improvement by contributing to the monitoring and evaluation of the education and clinical care provided at the individual and program level actively participates and monitors clinical practice and makes changes where appropriate takes opportunities to actively participate in research to build the evidence base in diabetes management and care uses ethical practices when conducting research utilises appropriate methodology when undertaking research implements remedial action where audit or quality improvement activity outcomes show deficits in practice actively utilises up-to-date evidence in the development and review of clinical resources, guidelines policies or procedures benchmarks services and service outcomes against appropriate indicators and other services to achieve best practice extracts, evaluates and interprets information from 	<ul style="list-style-type: none"> initiates and leads research through leadership and consultancy acts as an expert and resource to other health professionals in research methodology, analysis and implementation seeks opportunities to actively undertake research to build the evidence base in diabetes management and care undertakes advanced post graduate studies in Diabetes education and management to enhance the evidence actively disseminates research findings by presenting at conferences and workshops monitors and ensures research evidence is implemented into practice initiates the auditing and reporting of patient related experiences and patient related outcomes influences national policy regarding the need for evidence based research mentors and provides opportunities for those on level 1 and 2 to participate and gain skills in research and quality improvement

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	<p>relevant sources and changes practice based on emerging evidence</p> <ul style="list-style-type: none">• seeks opportunities to disseminate research findings and evidence based practice to other health professionals and members of the community	
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Domain 4: Management and Administration

Competency:

Credential Diabetes Educators (CDEs) apply principles of program and/or business management to contribute to the safe, effective and efficient delivery of diabetes services that supports successful self-management of prediabetes and diabetes.

Cues and examples to demonstrate each level of competency

Level 1	Level 2	Level 3
<ul style="list-style-type: none"> • complies with professional, ethical and legal regulations, policies and guidelines for diabetes educators • effectively and efficiently manages a client case load • effectively and efficiently utilises resources to deliver diabetes services • accurately documents and reports interactions with people living with diabetes • maintains knowledge and current database of other health professionals and services available to refer to • actively facilitates the effective referral to other health professionals and community services to maximise outcomes for people living with diabetes • ensures client information is made available to relevant health care providers in a timely manner and within the prescribed bounds of confidentiality • stores all records in accordance with national privacy laws • conducts education in a suitable, private, physical environment and ensures client safety and confidentiality • assists with the review and development of service related policies and procedures 	<ul style="list-style-type: none"> • manages the workload of the unit, allocating human resources in an efficient and effective way • assist with the development of units annual business plan • takes a lead in coordinating the development and review of service policies and procedures • participates in and contributes to workplace or organisational committees or working parties that support diabetes related service issues • assists with the planning and coordination of diabetes camps where appropriate • analyses data collected at the unit level to support the review and planning of diabetes related services 	<ul style="list-style-type: none"> • takes a lead role in the development of the units annual business plan • monitors the current system of service delivery; recognises system failures and develops strategies for improvement • takes an overall lead in the management of human and material resources to deliver efficient, effective service • takes the lead in developing links and referral pathways with community and other health agencies • applies a population based approach to service planning including systematic assessment of community needs • proactively initiates practice innovations, and service redesign solutions to provide a more efficient, effective service • collaborates with relevant stakeholders to identify and document overall diabetes service goals and targets and strategies to achieve these goals • reports to relevant authorities on the utilisation of the services • reviews information to identify barriers to health service access and equity of service provision

Domain 5: Leadership and Advocacy

Competency:

Credentialed Diabetes Educators (CDEs) provide expertise and leadership within the health profession and advocate for best practice diabetes care for all people living with prediabetes and diabetes.

Cues and examples to demonstrate each level of competency

Level 1	Level 2	Level 3
<ul style="list-style-type: none"> acts as a consultant and resource on diabetes education and management to others within the organisation they work disseminates the latest research, guidelines and procedures to other members of the health workforce recognises unsafe and unprofessional practice in others and responds appropriately according to professional codes of practice and organisational requirement advocates for diabetes, prevention, education and care and builds the capacity of the health workforce in this area identifies high risk groups and groups with special needs and actively advocates to adapt the service to accommodate their needs 	<ul style="list-style-type: none"> promotes a culture of collegiality that enables members of the multidisciplinary team to feel respected and valued participates in and contributes to the work of relevant committees creates and utilises opportunities to enhance public awareness of diabetes and provide education on choices conducive to general health and well being actively seeks opportunities to create partnerships with health and community organisations to promote the dissemination of diabetes awareness and healthy lifestyle information mentors other members of the diabetes care team 	<ul style="list-style-type: none"> works towards improving population-based interventions takes the lead on liaising with local and national public health networks and diabetes teams in the development of integrated diabetes care pathways actively seeks opportunities to represent diabetes educators and diabetes education on national and international committees, working groups and in review of government policy proactively advocates resources deficiencies in provision of diabetes care and needs of those living with diabetes and their family/ carers influences national policy regarding the promotion of improved services for people living with diabetes. works in collaboration with higher educational institutions and other educational providers to meet educational needs of other health care professionals

References

1. **Roache, M.S.** *The human act of caring: a blue print for the health professions (2nd Ed)*. Ottawa : Canadian Hospitals Associate Press, 1992.
2. **Nursing and Midwifery Board of Australia.** *Fact sheet: Continuing professional development for nurses and midwives*. Melbourne : AHPRA, 2016. cited 3 July 2017 at <http://www.nursingmidwiferyboard.gov.au/Registration-Standards/Continuing-professional-development.aspx>.
3. **Australian Diabetes Educators Association.** *Role and Scope of Practice for Credentialed Diabetes Educators in Australia*. Canberra : ADEA, 2015. cited 3 July 2017 at <https://www.adea.com.au/about-us/our-publications/>.
4. **Australian Diabetes Educators Association (ADEA).** *National Standards of Practice for Credentialed Diabetes Educators*. Canberra : ADEA, 2014. cited 30 May 2017 at <https://www.adea.com.au/wp-content/uploads/2009/10/ADEA-National-Standards-of-Practice-for-Credentialed-Diabetes-Educators.pdf>.
5. **Dreyfus, S. E. and Dreyfus, H.L.** *A five-stage model of the mental activities involved in directed skill acquisition*. Berkley : California University Operations Research Centre, 1980.
6. *From Novice to Expert*. **Benner, P.** 3, s.l. : American Journal of Nursing, 1982, Vol. 82.
7. **American Association of Diabetes Educators.** *Competencies for Diabetes Educators and Diabetes Paraprofessionals*. Chicago : AADE, 2016.
8. **Pharmaceutical Society of Australia.** *National competency standards framework for pharmacists in Australia*. Canberra : Pharmaceutical Society of Australia, 2010.