

Australian Diabetes Educators Association



Your trusted partner in diabetes care

Credentiailling and CPD Workshop

Understanding the changes to the
Credentiailling Program

ADS-ADEA ASM

Melbourne Convention and Exhibition Centre

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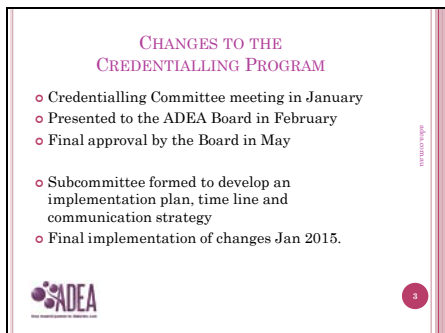
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THE SUB COMMITTEE

- o **Rachel McKeown** APD CDE, ADEA Professional Officer (project manager)
- o **Jan Alford** RN CDE, Chair Credentiailling Committee, member CASP
- o **Elizabeth Obersteller** NP CDE, member credentiailling committee and ASM POC
- o **Maxine Schlaeppi** NP CDE, member credentiailling committee





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WHAT IS CHANGING?

o Initial Credentiailling:

- 1800 hours – reduced to **1000 hours**,
 - o **60% of these hours must be in the preceding 12 months prior to applying**
- Hours of practice **can not** be accrued until **after commencement** of ADEA accredited Diabetes Education Course
- Applicants to be registered/accredited in primary discipline for **at least 2 years prior** to credentiailling application





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WHAT IS CHANGING?

o Mentoring Program



- Online learning modules for both mentee and mentors.
- Revamped Mentor Register.
- Forms will be On-line in 2015.
 - o Mentoring log
 - o Evaluation
- **Evaluation forms must be completed and submitted before credentiailling application approved**



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WHAT IS CHANGING

- CPD Portfolio
 - 20 CPD points per year
 - **must be diabetes related**
 - New categories and points system
 - Learning goals
 - Reflection /Learning Outcomes
 - On line CPD portfolio platform





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WHAT IS CHANGING?

- Credentiailling renewal will be yearly and linked to anniversary of membership
- A pro rata system will be put in place as of January 2015 to align credentiailling renewal dates with membership renewal dates



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Questions?



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THE NEW CPD PORTFOLIO

- Introducing the new CPD Portfolio
- Use of the new Templates
 - Optional until January 2015




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THE NEW CPD PORTFOLIO

- Step 1
 - Learning Goals
- Step 2
 - CPD Portfolio
- Step 3
 - Reflective Practice/Learning Outcomes
- Step 4 Back to Step 1



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STEP 1 – LEARNING GOALS

- Set minimum of 3 learning goals (6-12 months prior to application)
- Describe how the learning goals relate to your role and scope of practice

SMART Goal Setting:

- Specific
- Measureable
- Attainable/Achievable
- Relevant
- Time bound




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LEARNING GOALS

- At least 3 goals
- Skills and Knowledge to be gained
- Maintenance of skills and knowledge acceptable
- Needs may change




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EXAMPLES OF GOALS

- To maintain and enhance current knowledge in general diabetes education practice
- To demonstrate new skills and best practice in the management and care of people with gestational diabetes
- To extend mentoring/supervisory skills and knowledge




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EXAMPLES OF GOALS

- To establish skills in scientific writing for journal publication
- To enhance competency in research skills
- To develop skills in writing for the public
- To increase competency with writing grant proposals



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How to Set Learning Goals

The steps involved in formulating a personal learning plan include:

1. **Assessment**
2. **Goal setting**
3. **Objectives or action plan**
4. **Implementation or action**
5. **Evaluation**

Assessment

a) **Assess your current situation**

Reflect on your skills, knowledge and performance in your job. Consider your strengths and weaknesses. Justify your opinion to ensure your analysis is not over critical.

Eg.

- My knowledge of renal disease is limited. Analysis – in my routine practice I am often asked to educate patients with diabetes about renal disease and my lack of knowledge in renal disease and its outcomes provides uncertainty during the consultation.
- My area of expertise is gestational diabetes; I am often used as a resource person in this area. Analysis – I have recognised expertise in this area and would like to maintain and further enhance my skills.
- My poor computer skills limit my efficiency at work. Analysis – the secretary is overworked and there is a two week delay before my letters are typed.

b) **Consider in which direction you would like your career to progress**

- I would like to be a media spokesperson in my area of expertise.
Analysis – although I believe I am a capable spokesperson, I have had no formal training or assessment.
- I would like to become credentialled as a diabetes educator.
Analysis- Career path is potentially limited unless ongoing professional development is monitored.

c) **Identify external factors that may influence your professional goals**

- I am keen to attend the Diabetes in Pregnancy conference this year.
Analysis – Each staff member is only allowed to attend one conference per year which the work place will fund. A choice will need to be made as to which conference will best support the achievement of my professional goals.

Goal Setting

The assessment phase will enable you to determine a number of priority goals. Goals should be general statements of what you want to achieve. Focus on several goals that are attainable in a 12 month period.

- E.g.
- To be able to perform my own word processing faster than my secretary.
 - To successfully complete an accredited diabetes educators course.
 - To achieve and maintain the clinical knowledge and experience in the management of gestational diabetes.

Objectives

Objectives are the action plans by which your goals will be achieved. The criteria of objectives are to be SMART.

- **S**pecific
- **M**easurable
- **A**ttainable
- **R**esources
- **T**imebound

GOAL	OBJECTIVES = Something to achieve	STRATEGIES = Something to do
To be able to perform my own word processing faster than the secretary	To develop word processing skills To obtain access to a computer	To enrol in local TAFE computing course -Complete in 6 weeks -To book weekly computing time of 3 hours/week on the department computer
To improve my performance in public relation activities	To develop specific skills in public relations	Attend a media training workshop Volunteer to speak at grand rounds Join the public relations team at the hospital and contribute to their activities

Implementation

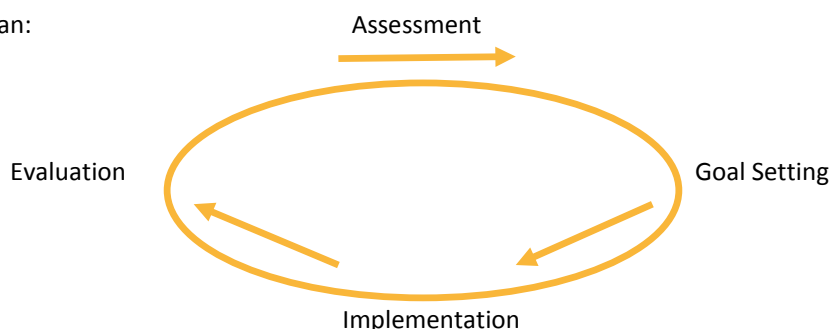
This represents the transition phase of the goals and objectives into action. Goals and objectives should be kept in a visible location to maintain your focus to consistently work towards achieving them. Documentation or recording your progress on the log sheets is valuable and will make evaluation easier.

Strategy = Something to do	Implementation (include dates)
To attend diabetes in pregnancy conference	6/8-7/8 Diabetes in Pregnancy meeting, 8 hours x 2 days. Perth.
Volunteer to speak at grand rounds	10/9 Grand Rounds presentation. 'New advances in Diabetes Management'. 30 minutes.

Evaluation

Evaluation is an important part of the personal learning plan. It measures the outcomes or it can provide an explanation as to why goals were not achieved. This may have been due to your inability to meet all of the objectives, or to circumstances beyond your control. Evaluation can occur individually, as part of the peer review process or with the assistance of a mentor.

Your Personal Learning Plan:



Examples of 'Clinician Learning Goals'

CPD PLAN FOR NEXT YEAR		
Set 3 to 5 learning goals for next year and describe how these goals relate to your role and scope of practice.		
	Learning Goal	Relationship to your role and scope of practice
1.	Improve knowledge of insulin pump therapy	In 2014-15 I will volunteer at camps for children with type1 diabetes. I'm expected to provide high quality care to children using insulin pumps.
2.	Improve quantitative research skills	At work I'm expected to analyse statistical data from my QI projects.
3.	Maintain skills in health coaching	I have taken a break from phone coaching until 2015, but I want to continue providing high quality self management support.

Examples of 'Management Learning Goals'

CPD PLAN FOR NEXT YEAR		
Set 3 to 5 learning goals for next year and describe how these goals relate to your role and scope of practice.		
	Learning Goal	Relationship to your role and scope of practice
1.	Present visual information more concisely	I plan to submit an abstract for a poster presentation in 2015 and I will need more advanced computer skills to design the poster.
2.	Adapt content of lectures to medical and pharmacy students to the feedback previously provided	I give three lectures to university students each year, and although participants completed evaluation surveys this year, I have not updated the lecture format since 2011.
3.	Support senior staff to work more autonomously	I lead a team of six team members, and I need to balance the needs of the department with the greater clinic

Examples of 'Researcher Learning Goals'

CPD PLAN FOR NEXT YEAR		
Set 3 to 5 learning goals for next year and describe how these goals relate to your role and scope of practice.		
	Learning Goal	Relationship to your role and scope of practice
1.	Complete research project on the patient experience of hypoglycaemia	I'm the lead researcher and I need to prepare the final report to secure ongoing for the next phase of this project.
2.	Improve my critical thinking skills	In 2015, I have committed to review abstracts for an international conference, with a very high standard of peer review expected.
3.	Refine my media skills	I have agreed to participate in two radio interviews. I'm expected to stay focussed and answer impromptu questions with confidence.

Participant Activity

CPD PLAN FOR NEXT YEAR



Set 3 to 5 learning goals for next year and describe how these goals relate to your role and scope of practice.

	Learning Goal	Relationship to your role and scope of practice
1.		
2.		
3.		
4.		
5.		

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STEP 2 - CPD PORTFOLIO


- Based on National Core Competencies
- 4 categories
- Examples provided
- Don't have to fit the examples provided



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CPD CATEGORIES



- **Category 1** – Clinical Practice / Diabetes Education / Counselling
- **Category 2** – Management / Administration / Leadership
- **Category 3** – Research
- **Category 4** – Professional Contribution



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THE REQUIREMENTS

- CPD activity can only be recorded in one category
- Generally one point per one hour
- Some activities are *capped!*
- Must be related to diabetes / diabetes education




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CPD PORTFOLIO

- The minimum total number of CPD points is 20.
- CPD Categories 1, 2 and 3 are compulsory.
- Depends on role and scope of practice.

Role	Clinical Work			Management			Research		
	Cat 1	Cat 2	Cat 3	Cat 1	Cat 2	Cat 3	Cat 1	Cat 2	Cat 3
Min pts reqd	15 pts	1 pt	1 pt	1 pt	15 pts	1 pt	1 pt	1 pt	15 pts




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POINTS SUMMARY

CPD Category	CPD Points Accrued	Suggested proportion of total CPD points for:		
		Clinician	Manager	Researcher
1-Clinical Practice, Diabetes Education, Counselling		75-80%	5-10%	5-10%
2-Management / Administration / Leadership		5-10%	75-80%	5-10%
3-Research		5-10%	5-10%	75-80%
4-Professional Contribution		5%	5%	5%
Total Points Accrued				



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Questions and Activity



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CPD Portfolio Points Guide

The Continuing Professional Development (CPD) Portfolio Points Guide provides an overview of the three (3) compulsory categories and the fourth category and how the required CPD Points can be achieved.

Please note the activities provided are examples only. ADEA welcomes other experiential learning, provided these activities can be substantiated. Other activities may be added to these lists in the future as technologies and evidence base changes. Please contact the ADEA Professional Officer if you have any queries or suggestions.

The CPD Portfolio categories have been developed to address the ADEA National Core Competencies for Credentiailled Diabetes Educators:

Category 1	Clinical Practice / Diabetes Education / Counselling
Category 2	Management / Administration / Leadership
Category 3	Research
Category 4	Professional Contribution

How to use this Guide

1. Read through the examples of CPD activities in each category.
2. Record the specific details of your CPD activities on the CPD Portfolio template. Remember the same CPD activity cannot be claimed in more than one category.
3. Record in your CPD Portfolio the relevant CPD points for each activity, as specified in this Guide.

Points Allocation

Generally, one point is allocated per hour of CPD, unless otherwise specified in this guide. Some activities are capped. Questions about point allocation will be clarified with ADEA's Credentiailling Committee.

Assistance using this Guide

Please contact ADEA's Professional Officer or Credentiailling Officer if you have any questions about the CPD Portfolio Points Guide. Phone: 02 6287 4822. Email: po@adea.com.au or cde@adea.com.au. Alternatively contact your state reviewer on the Credentiailling Committee. Contact details for the credentiailling committee can be found at <http://www.adea.com.au/credentiailling/credentiailled-diabetes-educators/re-credentiailling-2/>

Category One - Clinical Practice	CPD Points	Related to ADEA core competency
ADEA National Conference – 3 days.	24 (1/hour)	4.2.2
ADEA State conference – 1 day.	8 (1/hour)	4.2.2
Workshops or conferences relevant to educators work practice.	(1/hour)	4.2.2
Grand-rounds or case studies.	1/hour	4.2.2
Video or Audio recordings of conferences or meetings.	1/hour	4.2.2
Post-graduate study* relating to clinical care (per unit successfully completed).	8	4.2.2
e-learning with clinical care or education topic.	1/hour	4.2.2
Providing clinical support at a diabetes camp.	5/day	1.1, 1.3
Developing clinical diabetes education tools as appropriate.	1/hour (5 max)	2.4.1
Delivering education, training and workshops for clinical staff or carers.	2/course	5.3
Participating in ward rounds or clinical case review, case conference.	1/hour	1.4.3, 1.5.5, 3.5
Providing clinical placement work experience.	1/hour	5.4
Self-directed learning with clinical care or education topic.	1/hour	4.2.2

**Note: The Graduate Certificate in diabetes education is excluded from post-graduate study.*

Category Two - Management / Administration / Leadership	CPD Points	Related to ADEA core competency
Staff performance / peer review	5	4.2.1, 4.2.3, 4.2.4
Development of an annual business plan for diabetes related service.	1/hour (5 max)	3.2
Development and review of service policies and procedures.	1/hour (5 max)	3.3
Development of clinical pathways incorporating diabetes related management.	1/hour (5 max)	3.5
Participation in a committee or working party for diabetes related service issues.	1/meeting	3.5
Management of diabetes related health service budgets.	1/hour (5 max)	3.2.4, 3.4.2
Planning and coordination of a diabetes camp.	5/camp	3.1, 3.2, 3.3, 3.5
Self directed learning with management or administration focus e.g. e-learning, seminars.	1/hour	4.2.2
Involvement in Mentoring Partnership registered with ADEA (these points not available to mentees working towards <i>initial</i> credentialling)	5/partnership/ year	3.2.2, 3.2.3, 3.5.1, 3.5.2, 4.2
Completing ADEA online Mentoring modules (these points not available to mentees working towards <i>initial</i> credentialling)	1/hour	3.2.2, 3.2.3, 3.5.1, 3.5.2, 4.2
Development of strategic partnerships to enhance diabetes services.	3	3.5, 5.1.3
Development of diabetes related service business case.	1/hour (5 max)	3.2
Post-graduate study* relating to management (per unit successfully completed).	8	4.2.2

***Note:** The Graduate Certificate in diabetes education is excluded from post-graduate study.

Category Three - Research	CPD Points	Related to ADEA core competency
Literature review / review of journal articles –summary provided	1/hour (5 max)	4.3
Conducting a quality improvement activity	5	3.6
Participation in a quality improvement activity	3	3.6
Author or coordinator of diabetes research	5	4.4
Member of a research team	3	4.4
Supporting a diabetes research trial (recruitment/protocols)	1/contact (5 max)	4.4.3
Publication of peer-reviewed papers in a journal	5	5.2.2
Implementation of ‘evidence based’ changes to practice using literature	3	4.3
Development of ‘evidence based’ resources or policies using literature	1/hour (5 max)	3.3, 4.3
Application for a research grant.	3	3.4
Attending a conference, workshop or seminar with a research focus.	1/hour	4.2.2
Post-graduate study* relating to research (per unit successfully completed).	8	4.2.2

***Note:** *The Graduate Certificate in diabetes education is excluded from post-graduate study.*

Category Four– Professional Contribution	CPD Points	Related to ADEA core competency
Please note: The contribution can be to ADEA, or your profession (e.g. nursing, dietetics etc.), or your employers or the community as long as it is diabetes related.		
Membership of a committee or working party	5	5.2.1
Providing feedback about professional issues (meeting/survey)	1	3.2.2, 5.2.1
Providing feedback on draft documents about professional issues	1/hour	3.2.2, 5.2.1
Chairing a session at a scientific or educational meeting	1	5.4
Reviewing diabetes abstracts / grant applications / journal articles	3	5.4
Development of conference or workshop programs	5	5.4
Development or implementation of a community awareness program	1/hour	5.1
Presentations / lectures / poster display to community groups	2/presentation	5.1
Participation in a diabetes community committee or working party	1/meeting	5.1.2
Teaching students in a documented course	1/session	5.3
Teaching students, one to one or groups	1/hour	5.3
Key note speaker presentation on a medical/educational issue	5	5.3
Preparing an oral or poster presentation on a medical/educational issue	2	5.3, 5.2.2

Instructions to complete your annual CPD Portfolio

1. Use this template to record your CPD activities as per the *CPD Portfolio Points Guide*. For **Initial Credentialling** and if you are being **Audited** for re-credentialling, verification/proof needs to be submitted with your CPD activity claims.
2. Each CPD activity must be recorded in one category only (do not repeat the same CPD activity in a different CPD category).
3. The minimum total number of CPD points is 20. The points must relate to your practice in diabetes education and management. ADEA recognises that additional CPD portfolios are submitted to maintain primary health discipline registration/accreditation, therefore ADEA requires the 20 points submitted for credentialling as a Diabetes Educator be specifically related to the practice of diabetes education.
4. CPD Categories 1, 2 and 3 are compulsory. However, the minimum number of CPD points required in categories 1, 2 and 3 will depend on your role and scope of practice (see examples in table below):

	Mostly Clinical Work			Mostly Management Work			Mostly Research Work		
	Category 1	Category 2	Category 3	Category 1	Category 2	Category 3	Category 1	Category 2	Category 3
Minimum CPD Points required:	15	1	1	1	15	1	1	1	15

5. Add up the CPD points accrued in each CPD category, and complete the CPD Points Summary.

Please indicate (circle) your current Role and Scope of Practice

Mostly Clinical Work	Mostly Management Work	Mostly Research Work
----------------------	------------------------	----------------------

Participant Activity

Name: _____ CPD Portfolio Period From: _____ Until: _____

CPD COMPULSORY CATEGORY ONE – CLINICAL PRACTICE / DIABETES EDUCATION / COUNSELLING		
CPD Activity Date	Details of CPD Activity	CPD Points
TOTAL POINTS – CATEGORY ONE – CLINICAL PRACTICE / DIABETES EDUCATION / COUNSELLING		

Name: _____

CPD COMPULSORY CATEGORY TWO – MANAGEMENT / ADMINISTRATION / LEADERSHIP			
CPD Activity Date	Details of CPD Activity	CPD Hours	CPD Points
TOTAL POINTS – CATEGORY TWO – MANAGEMENT / ADMINISTRATION / LEADERSHIP			

Name: _____

CPD COMPULSORY CATEGORY THREE – RESEARCH			
CPD Activity Date	Details of CPD Activity	CPD Hours	CPD Points
TOTAL POINTS – CATEGORY THREE – RESEARCH			

Name: _____

CPD CATEGORY – PROFESSIONAL CONTRIBUTION			
CPD Activity Date	Details of CPD Activity	CPD Hours	CPD Points
TOTAL POINTS – CPD CATEGORY – PROFESSIONAL CONTRIBUTION			

Name: _____

CPD PORTFOLIO POINTS SUMMARY				
CPD Category	CPD Points Accrued	Suggested proportion of total CPD Points for		
		Clinician	Manager	Researcher
1 – Clinical Practice / Diabetes Education / Counselling		75-80%	5-10%	5-10%
2 – Management / Administration / Leadership		5-10%	75-80%	5-10%
3 – Research		5-10%	5-10%	75-80%
4 - Professional Contribution		5%	5%	5%
TOTAL POINTS ACCRUED				

Notes:

1. The minimum total number of CPD points is 20.
2. A minimum number of points are set for categories 1, 2, and 3, and this will depend on your primary area of work. The remainder of the required CPD points can be accrued over any of the 4 categories to achieve 20 CPD points in total.
3. The suggested proportion of total CPD points is provided as a guide only. ADEA acknowledges that some job descriptions do not neatly fit into the category of clinician, manager or researcher.

DECLARATION

By sending this CPD Portfolio to ADEA, you:

1. Confirm the information provided is a true and accurate record of your CPD activities for the year.
2. Agree to keep evidence to substantiate CPD points you have claimed. This evidence must be produced if your CPD Portfolio is audited.

Signed: _____


Date: _____

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STEP 3-
REFLECTIVE PRACTICE / LEARNING OUTCOMES

Describe how learning from each **compulsory category**:

- o Met their learning goals
- o Was applied to or changed their practice
- o Improved knowledge and competence




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REFLECTIVE PRACTICE EXAMPLES

- o I have maintained my knowledge of general diabetes education practice so that I am aware of the environment in which I work. I feel that I am more able to deliver services and advocate for diabetes education, management and care.
- o I have extended my skills in the management and care of people with gestational diabetes. I have been more able to advise patients using best practice self management and care guidelines for GDM.
- o I have extended my mentoring skills through self reflection, and discussion with colleagues. I have now taken on the role of mentor for new staff in our agency



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Questions and Activity



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CPD Portfolio Reflection / Learning Outcomes

What is reflection?

- Reflection is defined as 'careful, purposeful re-examination and evaluation of experiences, beliefs and knowledge'.
- Reflective practice involves thinking about and reviewing past actions.

Why reflect on CPD activities?

- Acquiring information does not necessarily translate into changes in knowledge or practice.
- AHPRA-registered professionals and APD's are required to reflect on how information acquired through CPD was used in or applied to practice.
- During the ADEA Credentialling and Re-Credentialling Review, stakeholders strongly supported including reflective practice and requiring members to explain how they used CPD in the new process.

CPD Portfolio Reflection Process

Since reflection is an integral aspect of learning, ADEA's Annual CPD Portfolio encourages CDE members to reflect on:

1. How learning from their CPD activities was:
 - a. Applied to their practice;
 - b. Changed their practice;
 - c. Improved their knowledge and competence.
2. Their future learning goals and how their learning needs relate to their role and scope of practice.

Reflection and Competency

The CPD Portfolio Points Guide links various CPD activities to the ADEA *National Core Competencies for Credentialled Diabetes Educators*.

Credentialling applicants are encouraged to consider whether learning from their CPD activities promoted:

- Safe, effective, client-centred, clinical care to people with diabetes?
- Safe, effective, client-centred diabetes self-management education?
- An organised and well-managed diabetes service?
- Professional responsibility and accountability when planning and delivering diabetes self-management education and clinical care?
- Leadership and advocacy for diabetes education and care?
- Research knowledge and competence?

Further Reading

The following references have been provided for further information about reflective practice:

- Bennett-Levy J., Thwaites R. (2006) A conceptual map and practical strategies for the training, supervision and self-supervision of interpersonal skills; Chapter 12 in *Self and Self-reflection in the Therapeutic Relationship*.
- Dewey, J. (1933). *How we think: A restatement of the relation of reflective thinking to the educative process*. Boston: Houghton Mifflin Company.
- Jarvis P. (1992) Reflective practice and nursing. *Nurse Education Today* 12: 23-30.
- Kember D. (2001) *Reflective teaching and learning in the health professions: Action research in professional education* Oxford: Blackwell Science.
- Kember D., McKay J., Sinclair K., Wong F. (2008) A four category scheme for coding and assessing the level of reflection in written work. *Assessment and Higher Education* 33(4):369-370.
- King P, Kitchener K. (1994) *Developing Reflective Judgment: Understanding and Promoting Intellectual Growth and Critical Thinking in Adolescents and Adults*. Jossey-Bass, San Francisco.
- Schon, D (1983) *The Reflective Practitioner: how professionals think in action* Basic Books New York.

Examples of 'Clinician Reflection'

Reflection on CPD Compulsory Category One – Clinical Practice / Diabetes Education / Counselling		
Describe how your learning from CPD activities in category one:		
1.	Was applied to or changed your practice	<i>Now responding to patient's blood glucose record more respectfully and asking patient for permission before giving advice. Helping client to brainstorm their own solutions rather than trying to impose my ideas. Allowing clients to set the agenda at appointments and prioritising the issues that are important to them.</i>
2.	Improved your knowledge and competence.	<i>Delivering high quality care to patients on Byetta by becoming more knowledgeable about treatment protocols and side effect management.</i>

Reflection on CPD Compulsory Category Two – Management / Administration / Leadership		
Describe how your learning from CPD activities in category two:		
1.	Was applied to or changed your practice	<i>Applied current evidence to best practice guidelines for hypos, and changed the way I treated hypoglycaemia in people with dysphagia.</i>
2.	Improved your knowledge and competence.	<i>Now more knowledgeable about hypo treatment for people with both diabetes and dysphagia, and giving these patients and their carers more appropriate advice.</i>

Reflection on CPD Compulsory Category Three – Research		
Describe how your learning from CPD activities in category three:		
1.	Was applied to or changed your practice	<i>Now disseminating patient information leaflets with the most current information on GI.</i>
2.	Improved your knowledge and competence.	<i>More familiar with process to enter project data into statistical software. Producing good quality evidence through ongoing involvement in QI projects.</i>

Examples of 'Management Reflection'

Reflection on CPD Compulsory Category One – Clinical Practice / Diabetes Education / Counselling		
Describe how your learning from CPD activities in category one:		
1.	Was applied to or changed your practice	<i>I have been using new strategies to manage 'frequent flyers' presenting with DKA based on information presented at the National Conference and discussions with interstate colleagues that attended the conference.</i>
2.	Improved your knowledge and competence.	<i>I'm now more knowledgeable about changes to Child Protection legislation, and more competent using the updated child protection forms when I report incidents.</i>

Reflection on CPD Compulsory Category Two – Management / Administration / Leadership		
Describe how your learning from CPD activities in category two:		
1.	Was applied to or changed your practice	<i>I've started reporting critical incidents more promptly since attending the Riskman training for managers.</i>
2.	Improved your knowledge and competence.	<i>I have become more familiar with the current evidence based guidelines for type 1 diabetes since I started applying these guidelines to my department's existing policies. As a result of updating these policies, the whole department is working more competently and adhering more closely to best-practice.</i>

Reflection on CPD Compulsory Category Three – Research		
Describe how your learning from CPD activities in category three:		
1.	Was applied to or changed your practice	<i>Since the audit I have been less inhibited about discussing alcohol use with adolescents with type 1 diabetes and their parents or carers.</i>
2.	Improved your knowledge and competence.	<i>I now have a better understanding of insulin pump commencement processes used in tertiary diabetes centres around Australia. Disseminating this research has improved my academic writing competency.</i>

Examples of 'Researcher Reflection'

Reflection on CPD Compulsory Category One – Clinical Practice / Diabetes Education / Counselling		
Describe how your learning from CPD activities in category one:		
1.	Was applied to or changed your practice	<i>I've adopted the term 'knowledge translation' to describe the interaction between my research activities and the end-users of this evidence.</i>
2.	Improved your knowledge and competence.	<i>I've increased my awareness of chronic disease management training options for newcomers.</i>

Reflection on CPD Compulsory Category Two – Management / Administration / Leadership		
Describe how your learning from CPD activities in category two:		
1.	Was applied to or changed your practice	<i>I've formed partnerships with several rural diabetes services to enhance their research capacity.</i>
2.	Improved your knowledge and competence.	<i>I now have a better understanding of how research findings are adopted by primary healthcare professionals. I'm getting better at helping clinicians adapt research findings to their policies and professional practice.</i>

Reflection on CPD Compulsory Category Three – Research		
Describe how your learning from CPD activities in category three:		
1.	Was applied to or changed your practice	<i>Since completing two units on qualitative research, I've using new methods to analyse and interpret focus group recordings.</i>
2.	Improved your knowledge and competence.	<i>I've developed a better understanding of which grant applications succeed, and I'm completing grant applications more quickly and concisely.</i>

Participant Activity

Reflection on CPD Compulsory Category One – Clinical Practice / Diabetes Education / Counselling

Describe how your learning from CPD activities in category one:

1.	Was applied to or changed your practice	
2.	Improved your knowledge and competence.	

Reflection on CPD Compulsory Category Two – Management / Administration / Leadership

Describe how your learning from CPD activities in category two:

1.	Was applied to or changed your practice	
2.	Improved your knowledge and competence.	

Reflection on CPD Compulsory Category Three – Research



Describe how your learning from CPD activities in category three:

1.	Was applied to or changed your practice	
2.	Improved your knowledge and competence.	

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BACK TO STEP 1

- o Set 3-5 learning goals
- o Describe how the learning goals relate to role and scope of practice
- o Goals may be similar each year but should show progression of knowledge / experience



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ACKNOWLEDGEMENTS

ADEA would like to thank

The ADEA Credentiailling Committee, particularly Jan, Liz and Maxine, for their ongoing support and invaluable time as hard working volunteers for the ADEA.

Thank You



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QUESTIONS



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