

Changes to the ADEA Credentialling Program

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Background:

The Australian Diabetes Educators Association

The Australian Diabetes Educators Association (ADEA) is the leading organisation in Australia for healthcare professionals with a special interest in diabetes education. It is recognised nationally and internationally as a principal organisation providing education, support and direction for health professionals providing education and care for people with diabetes, their families/carers, the community and colleagues.

Vision: Excellence in Diabetes Supportz

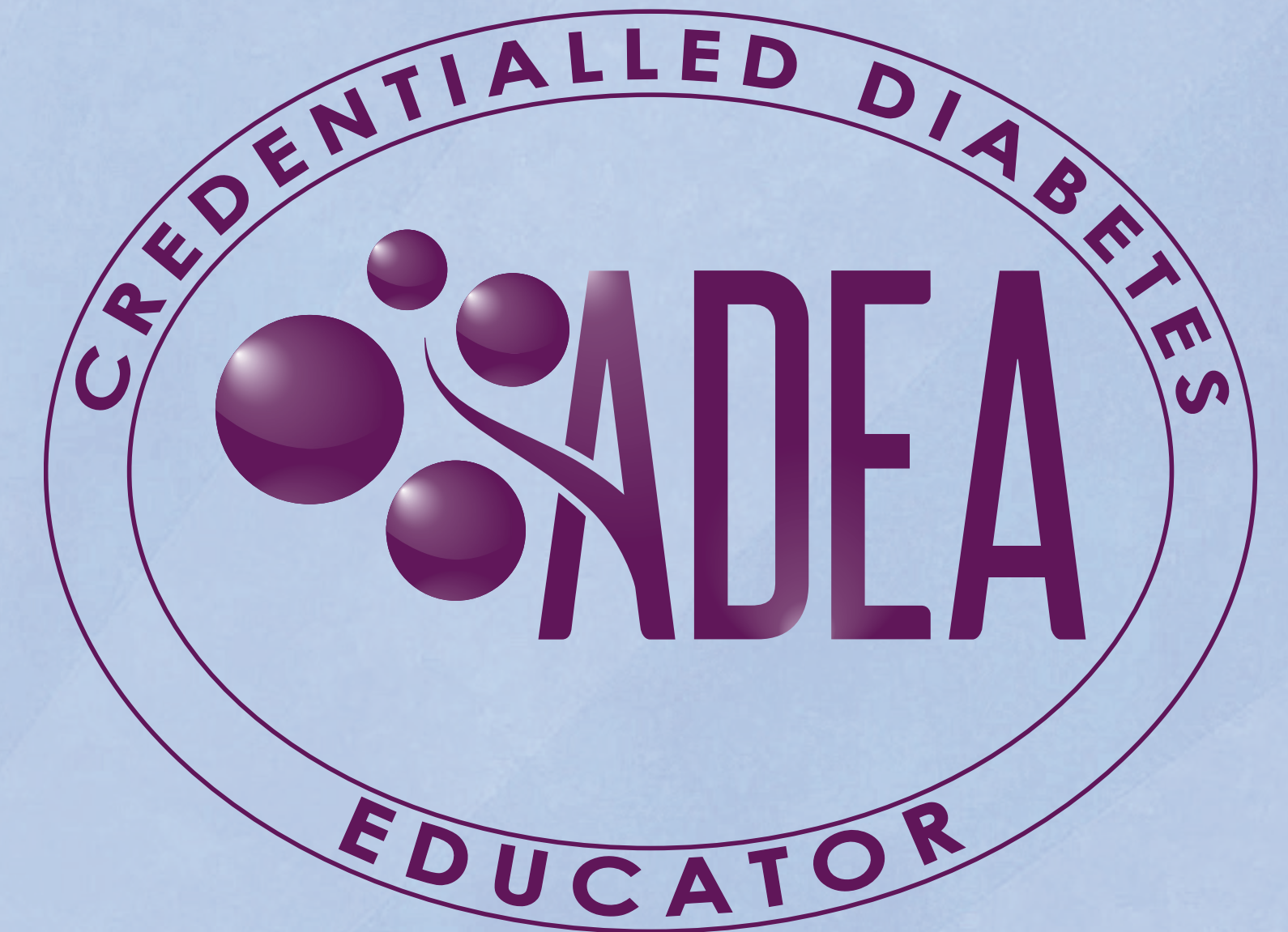
Mission: To lead and advocate for best practice diabetes education and care.

Strategic Themes 2012-17:

1. Increase member value
2. Directly influence government policy, NGOs and the broader diabetes agenda
3. Strengthen the ADEA's research contribution
4. Increase the value of the CDE/diabetes education
5. Set the standards for diabetes education
6. National Office

The ADEA Credentialling Program

- ADEA introduced the certification trademark of the Credentialed Diabetes Educator (CDE) in 1986 and since then, has been implementing the ADEA Credentialling program.
- It is a professional recognition and development program to support healthcare professionals providing diabetes education and care.
- The process is managed by ADEA National Office and the ADEA Credentialling Committee. The committee is made up of ADEA members who are CDEs, with at least one representative from each State and Territory.
- CDE status assures quality, expertise, high standards and experience in diabetes education.
- ADEA requires members to demonstrate proficiency in their role as a CDE by demonstrating continued professional development (CPD) through the Credentialling and Re-Credentialling program.
- Once credentialling criteria are met, ADEA members are entitled to use the term Credentialed Diabetes Educator® (CDE).



Introduction:

A review of the ADEA Credentialling Program occurred in 2010 and was deemed necessary considering:

- A review of the credentialling and re-credentialling program had not been undertaken since 2001.
- Changes have occurred in the health field generally, and diabetes particularly.
- A review had occurred of the regulatory frameworks that govern health care professionals (HCP) in Australia.
- Research and technology has influenced change in clinical practice and health service delivery systems that affect roles and scope of practice.
- ADEA is under increasing pressure to admit other HCP disciplines as full members of the Association and that these HCP disciplines be eligible to seek CDE status.
- ADEA members and the ADEA Credentialling Committee expressed concerns about the process of the credentialling and re-credentialling program.

Aim:

To implement the changes to the ADEA Credentialling Program as recommended by the Review of the ADEA Credentialling Program (Dunning 2010) and subsequent ADEA Continuing Professional Development (CPD) Portfolio Pilot Project (ADEA 2013).

Method:

Following the review and the subsequent CPD Portfolio Pilot Program a set of recommendations were made to the ADEA Board by the ADEA Credentialling Committee. The Board approved the recommendations which included the establishment of a subcommittee to develop an implementation plan and communication strategy. Consultation also occurred with the ADEA website developers and ADEA National Office staff to plan an on line credentialling platform.

The Changes:

The changes to the credentialling program include:

- Revised criteria for initial credentialling
 - o 1000 hours of practice in Diabetes Education over 4 years with 60% of those hours being accrued in the 12 months prior to application.
 - o The hours of practice in Diabetes Education cannot be accrued until the commencement of an ADEA accredited Diabetes Education course.
 - o The applicant must have been registered/accredited in their primary discipline for at least 2 years prior to being credentialled.
- Revised ADEA mentoring program
 - o Online mentoring program platform.
 - o Online learning modules, compulsory for mentees in the initial credentialling process.
 - o The 6 month mentoring partnership to be within the 12 months prior to initial credentialling application.
- CDP Portfolio
 - o The number of required CPD portfolio points is 20 points in the 12 months prior to credentialling or re-credentialling application and must be directly related to diabetes. The categories and points guide are the same for both credentialling and re-credentialling.
 - o Include annual learning goals and reflection on learning outcomes.
 - o Online, new-look templates encompassed within members online profiles. This will improve and streamline the application process and assist members in maintaining CPD portfolios and evidence of activities.
- Online processing of applications and payments.
- Annual re-credentialling merged with membership dates.

Implementation:

Communication was provided to members through various channels:

- ADEA Website
 - o Summary and in-depth explanation of all credentialling changes
 - o Implementation plan and timeline
 - o Webinars, resources and powerpoint presentations
- Weekly ADEA e-newsletter to members
- Quarterly ADE publication to members
- Face-to-face presentations at ADEA state and territory branch meetings, delivered by members of the Credentialling Committee
- Credentialling and CPD Workshop and Mentoring Program Presentation at the ADS-ADEA Annual Scientific Meeting 2014

The first step in the process was to introduce the use of the new CPD portfolio templates by both initial credentialling and re-credentialling applicants. As these were the templates used in the CPD Portfolio Pilot Project, many ADEA members had experience with them already.

The remaining changes to the credentialling and re-credentialling program, including the online version of the program is planned to be available from January 2015. ADEA members will continue to receive regular notifications and advice from ADEA National Office and Credentialling Committee members as all of these changes are rolled out.

Discussion:

Much consultation has occurred with various stakeholders since the initial review of the ADEA credentialling program in 2010. ADEA members have played a pivotal part in the consultation process throughout via surveys, meetings, involvement in and follow up from the CPD Portfolio Pilot Project and presentations.

The subcommittee was established from within the ADEA Credentialling committee who are now undertaking the process of implementing the recommended changes to the credentialling program.

Implementation is expected to be complete by January 2015.

Conclusion:

Successful implementation of changes to a long-standing program within ADEA has taken some years to investigate, develop and implement. This has been necessary to ensure changes reflect the best outcomes for all stakeholders. The credentialling committee and subcommittee have been pivotal in planning, strategising and implementing the changes recommended to ensure the best outcomes for ADEA members.

For further information on the ADEA Credentialling Program, please visit the ADEA stand at the conference or got to **www.adea.com.au** .



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