

Guidelines for indigenous allied health,  
indigenous enrolled nurses, Aboriginal  
health workers and Aboriginal health  
practitioners applying for Credentialling as a  
Diabetes Educator



Your trusted partner in diabetes care

## Guidelines for indigenous allied health, indigenous enrolled nurses, Aboriginal health workers and Aboriginal health practitioners applying for credentialling as a diabetes educator

*Indigenous health professionals with a primary health discipline not currently eligible for credentialling are able to apply as an individual applicant using these guidelines.*

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URL: <https://www.adea.com.au/credentialling/initial-credentialling/primary-discipline/>

## Abstract

In 2017, the Australian Diabetes Educators Association (ADEA) board of directors approved an application from the Indigenous Allied Health Association (IAHA) and the National Aboriginal and Torres Strait Islander Health Workers Association (NATSIHWA), and following recommendations from the ADEA Credentialling Committee, to consider individual applications from indigenous health professionals to apply for credentialling as a diabetes educator.

The application from IAHA and NATSIHWA was approved for a period of three years, when the process and outcomes will be reviewed.

This document outlines the initial credentialling and eligibility requirements for individual indigenous allied health, indigenous enrolled nurses, Aboriginal Health Workers and Aboriginal Health Practitioners wanting to become a Credentialed Diabetes Educator.

## Keywords

Credentialling

Indigenous Allied Health practitioner

Indigenous Enrolled Nurse

Aboriginal Health Worker

Aboriginal Health Practitioner

Credentialed Diabetes Educator

Initial Credentialling requirements

## Acknowledgements

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### Suggested citation

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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 2,200 members working in various sectors and across various 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](http://www.adea.com.au).

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## Background

ADEA recognises the need to improve the health outcomes for Aboriginal and/or Torres Strait Islander people living with diabetes.

Aboriginal and Torres Strait Islander people are almost four times more likely to have diabetes or pre-diabetes than non-Indigenous, and diabetes was found to be more than double in remote areas (21%) compared with non-remote areas (9%). Type 2 diabetes is a significant contributor to morbidity and mortality rates for indigenous adults.

ADEA is committed to supporting Indigenous communities to better health outcomes, improving the lives of indigenous people affected by diabetes and recognising and enhancing the role of Indigenous health professionals. Consideration has been given to the skills, knowledge and competencies required to provide culturally appropriate diabetes education.

## Eligibility to Commence the Initial Credentialling Process

National health professional organisations apply to the ADEA Board to have their members' primary health discipline qualification recognised as having the underlying clinical and chronic health disease knowledge and experience to undertake the credentialling process as a diabetes educator. Further information regarding this process can be found on the ADEA website: [www.adea.com.au](http://www.adea.com.au)

Rather than a national indigenous health professional body applying to ADEA for eligibility for indigenous health professionals who are not already a member of one of the eligible primary health disciplines, individual applications can be submitted from indigenous allied health, indigenous enrolled nurses and Aboriginal health workers and practitioners who meet the criteria below. Once an individual application for eligibility has been assessed and approved according to the below criteria, that individual can proceed to apply for initial credentialling.

Indigenous allied health, indigenous enrolled nurses, Aboriginal health workers and Aboriginal health practitioners can apply to ADEA for an eligibility assessment by submitting evidence to meet the following criteria.

The applicant must:

- work primarily with indigenous people at risk of, or diagnosed with diabetes
- have, at a minimum, a certificate IV in Aboriginal and/or Torres Strait Islander Primary Health Care Practice or above, a certificate IV in enrolled nursing, or the equivalent for allied health professional qualifications
- demonstrate foundation knowledge and skills in:
  - anatomy and physiology
  - aetiology and pathophysiology of disease
  - biochemistry and interpretation of clinical laboratory assessments and use in case management
  - human nutrition
  - pharmacotherapy, including quality use of medicines (including traditional medicines and therapies)
  - public health and health promotion
- have an understanding of working within a team environment

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- demonstrate how to assess an individual's health status and develop a care plan designed to support the person with diabetes to achieve and maintain health including a plan for monitoring outcomes
- demonstrate knowledge of the role of research and quality activities
- have completed a clinical placement component as part of the certificate IV qualification or allied health qualification
- be assessed by a manager or supervisor against the competency standards in diabetes for Aboriginal health workers and health practitioners, developed by ADEA.

## Documentation Required to Apply for Assessment of Eligibility for Credentialling as a Diabetes Educator

Please submit the following documentation for assessment:

1. A completed eligibility application form (see *Application form – individual eligibility assessment for ADEA credentialling for indigenous health professionals*)
2. Copy of current AHPRA registration OR  
If the applicant does not have AHPRA registration:
  - a) a letter from the applicants current workplace describing governance policies and procedures, specifically including the mechanism for complaints and disciplinary action
  - b) a letter from the applicants workplace that addresses any complaints made or disciplinary actions taken against the applicant
  - c) evidence of continuing professional development (CPD) activities for the past 12 months
3. Current resume
4. Evidence of current supervision and/or support program
5. Copy of full academic transcript and copy of unit outline that documents the skills and knowledge obtained by completing the unit(s), and evidence of clinical placement.
6. Workplace plans and programs related to diabetes
7. Current position description that describes a role that supports people living with, or at risk of developing, diabetes
8. Letter of support from supervisor or manager that can confirm the applicant's skills according to the competency standards for Aboriginal and/or Torres Strait Islander diabetes aboriginal health workers and aboriginal health practitioners using the supplied template (Appendix A). The author of the letter must have recently observed the applicant's work and is able to confirm knowledge, skills and experience against the competencies: [National Core Competencies for Aboriginal and/or Torres Strait Islander Diabetes Health Workers and Diabetes Health Practitioners](#)

## Assessment of Individual Applications

Applications will be assessed by two independent assessors, the Chair of the Credentialling Committee (CC) and the Chair of the Course Advisory and Standards of Practice (CASP) Committee.

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Once the application has been reviewed, a recommendation will be made to the ADEA Board.

The ADEA Board will make the final decision on approving individual applications.

If approved the applicant will be notified that they can commence the initial credentialling process.

### Initial Credentialling Process

Once approved as eligible the individual must satisfy the initial credentialling requirements applicable to all CDEs.

This includes:

- Complete a Graduate Certificate in Diabetes Education and Management at an ADEA accredited Universities
- Be a full member of ADEA
- Complete a 6 month mentoring program partnership with a CDE
- Complete 1000 hours of practice in diabetes education and management
- Complete a 12 month CPD Portfolio according to the Credentialling Assessment and CPD Points Guide
- A referee's report addressing the National Competencies for Credentialled Diabetes Educators.

### Re-credentialling Requirements

As required for all CDEs, maintaining credentialling status will require annual submission of:

- 1- Full membership of ADEA
- 2- Copy of current AHPRA registration OR  
If the applicant does not have AHPRA registration:
  - a) a letter from current workplace addressing governance issues such as a complaints and disciplinary mechanisms and that addresses any complaints made or disciplinary actions taken against the applicant,
  - b) evidence of generalist continuing professional development (CPD) and mandatory training activities for the past 12 months
- 3- A diabetes-specific CPD Portfolio, including 20 points of CPD activities.



## Appendix A

Template for letter of support from supervisor or manager that can confirm the applicant's skills according to the competency standards for Aboriginal and/or Torres Strait Islander diabetes aboriginal health workers and aboriginal health practitioners.

### To Whom It May Concern:

Aboriginal and/or Torres Strait Islander Allied Health, Enrolled Nurses, Diabetes Health Workers and Diabetes Health Practitioners may work in a variety of practice settings within Indigenous communities, and work in roles that span the intervention and care continuum. This letter of support template is based on the developed [competency standards for Aboriginal and/or Torres Strait Islander diabetes aboriginal health workers and aboriginal health practitioners](#) that are underpinned by a core body of knowledge, skills and activity in the following domains:

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

Aboriginal and/or Torres Strait Islander health professionals working with people with diabetes and pre-diabetes have a duty of care 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 Indigenous people with, or at risk of developing, diabetes.

In order to do this, the following support letter template asks you to identify how the applicant:

- applies knowledge and understanding of best practice treatment, management and care of people with prediabetes and diabetes.
- applies evidence based education and self-management techniques to improve outcomes for people with prediabetes and diabetes.
- contributes to research and quality improvement to build the evidence base to support improvements in self-management prediabetes and diabetes education and care.
- applies principles of program management to contribute to the safe, effective and efficient delivery of diabetes services that supports successful self-management of prediabetes and diabetes
- provides expertise and leadership within the health profession and advocate for best practice diabetes care for all people living with prediabetes and diabetes.

Please provide a cover letter on your organisation letterhead to accompany the below completed document.

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### About the Referee

I [Click here to enter text.](#) (Referee Name)  
[Click here to enter text.](#) (Contact Phone Number)  
[Click here to enter text.](#) (Workplace)  
[Click here to enter text.](#) (Role)

hereby agree to act as a referee for [Click here to enter text.](#) (Applicant Name)

**Please list your qualifications and experience in the box below:**

[Click here to enter text.](#)

**Relationship to Applicant: (please tick most appropriate answer/s)**

Immediate Supervisor

Manager

**How long have you known the applicant?** [Click here to enter text.](#) years

## Assessment of Practice

The applicant must demonstrate all of the competencies for Aboriginal and/or Torres Strait Islander diabetes aboriginal health workers and aboriginal health practitioners, as per the [competency standards for Aboriginal and/or Torres Strait Islander diabetes aboriginal health workers and aboriginal health practitioners](#)

As the referee, you are asked to provide information that reflects the applicant's performance against these competencies. Evidence must be demonstrated in all 5 domains.

### 1. Clinical Practice

**Please comment in the box below on the applicant's clinical practice, providing examples of evidence of competency, where appropriate.**

**Competency:**

*Apply knowledge of best practice treatment, management and care to people with prediabetes and diabetes.*

*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**

- 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 applicable regulatory framework governing Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners
- apply or promote systematic and comprehensive person-centred care that is delivered 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 interdisciplinary 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.

[Click here to enter text.](#)

## 2. Education and Counselling

**Please comment in the box below on the applicant’s education and counselling knowledge and skills, providing examples of evidence, where appropriate.**

### **Competency:**

*Apply evidence based education and self-management skills, interventions and techniques to improve outcomes for people living with prediabetes and diabetes.*

*Work within an interdisciplinary diabetes team to tailor interventions to individual self-management education needs.*

### **Core skills, knowledge and values**

- refer to and apply evidence based guidelines and innovative techniques to enhance communication and self-management behaviours
- demonstrate appropriate 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
- utilises a person-centred approach that is cognisant of the person with diabetes/their carer’ 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 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
- apply problem solving techniques and a non-judgemental approach when dealing with people living with diabetes or at risk of developing diabetes.

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### 3. Research and Quality Improvement

**Please comment in the box below on the applicant's competency relating to research and quality improvement, providing examples of evidence, where appropriate.**

**Competency:**

*Contribute to research and quality improvement to build the evidence base to support improvements in self-management prediabetes and diabetes education and care.*

**Core skills, knowledge and values**

- are committed to improving the quality and outcomes of treatment, management and care for people living with prediabetes and diabetes through participation through 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 has been 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 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 this area.

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#### 4. Management and Administration

**Please comment in the box below on the applicant's management and administrative skills, providing examples of evidence, where appropriate.**

**Competency:**

*Apply principles of program management to contribute to the safe, effective and efficient delivery of diabetes services that supports successful self-management of prediabetes and diabetes.*

**Core skills, knowledge and values:**

- 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 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/their carers
- contribute to the development of policies and procedures that support efficient diabetes service delivery.

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## 5. Leadership and Advocacy

**Please comment in the box below on the applicant's leadership and advocacy skills, providing examples of evidence, where appropriate.**

**Competency:**

*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:**

- 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 the 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 and others and responds appropriately according to professional codes of practice and organisational requirement
- seek opportunities to professionally contribute to the field of diabetes education, management and care.

[Click here to enter text.](#)

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**Please provide any additional comments:**

[Click here to enter text.](#)

I confirm that I have received a copy of the National Core Competencies for Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners and have provided an independent view of the applicants' ability to meet these.

**Signature:** [Please sign or insert electronic signature here.](#)

**Date:** [Click here to enter a date.](#)