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Research
Driving Practice
Professional Development
Integration
Advocacy
Membership

AADE American Association
of Diabetes Educators

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AADE American Association
of Diabetes Educators



MESSAGE FROM THE PRESIDENT AND CEO

AADE is dedicated to securing a sustainable future for diabetes education, and we are prepared to meet the challenges ahead.

The 2006–07 year was an exceptional time of strategic growth for our association. AADE’s volunteer leadership, member professionals, staff and industry partners were instrumental in our accomplishments, and we would like to thank them for their dedication and commitment to making this year a success.

This year, we furthered our effort to create a comprehensive body of knowledge about diabetes education and its evidence-based outcomes. We administered the third annual National Practice Survey, which helps us identify trends and changes in diabetes education; completed a series of seven systematic reviews of the AADE7™ Self-Care Behaviors; and raised funding for two research grants that focus on the impact of diabetes educator interventions on the self-care of people with diabetes. Each of these projects represents an important step toward building an evidence base for the practice of diabetes education and articulating the value of diabetes educators.

As diabetes educators, we can see the shifting landscape of diabetes care in our work environments and patient populations, but we are looking at a future that is still undefined. If we are to change this state of affairs, we must continue to claim our ground and engage a wide variety of healthcare professionals in an open and productive dialogue about the future of diabetes education.

AADE demonstrated our dedication to this goal by inviting key stakeholders to participate in a Discovery Summit to develop a shared model of diabetes care that has a well-marked place for diabetes education. Participants generated a plan for creating an integrated health system and defining the roles of patients and providers in the treatment of people with diabetes.

In order to bring about effective, sustainable change in diabetes care, we must continue to form alliances among industry and other healthcare organizations to raise recognition of our role as educators and respect for our contribution to diabetes patient outcomes. To this end, we partnered with several organizations to present public awareness

campaigns, and we expanded the Industry Allies Advisory Council with the addition of two new members.

One of our greatest successes this year was the launch of our own patient education campaign, *Side by Side: A Partner Approach to Diabetes Self-Care*. Sponsored by a grant from Novartis Pharmaceuticals Corporation, this campaign focuses on the important role that members of the care team, particularly the diabetes educator, play in patients' diabetes self-care.

These accomplishments and the others detailed in this Annual Report show that we have worked hard to prove the worth of educators, form and preserve strong, strategic partnerships, and define a place for ourselves in the changing landscape of the healthcare system. These goals have been the driving force behind all of our activities this year, and we have made tremendous progress on all three fronts.

The progress we have made in all of our strategic goal areas is largely due to the continued financial success of our association. Fiscal Year 2006–07

was the seventh consecutive year of increased revenue growth. With projected gross revenues of \$11 million – an 11% growth from the previous year – AADE was able to greatly enhance its membership benefits. The revenue sources detailed in the following financial charts were used to enhance our educational offerings, launch a new member publication, provide increased networking and career enhancement opportunities, and engage in activities and conversations that will secure the future of the profession.

We know that diabetes educators are essential members of every diabetes care team. We are skilled in both the delivery of knowledge and in the interventions that create behavior change. We are change agents and interventionists. If the global healthcare community hopes to combat the growing diabetes epidemic, diabetes education must become a primary focus in health care and every patient must have access to the skills and expertise of a diabetes educator.

This is the vision that AADE embraces; this is the future that we are working toward.



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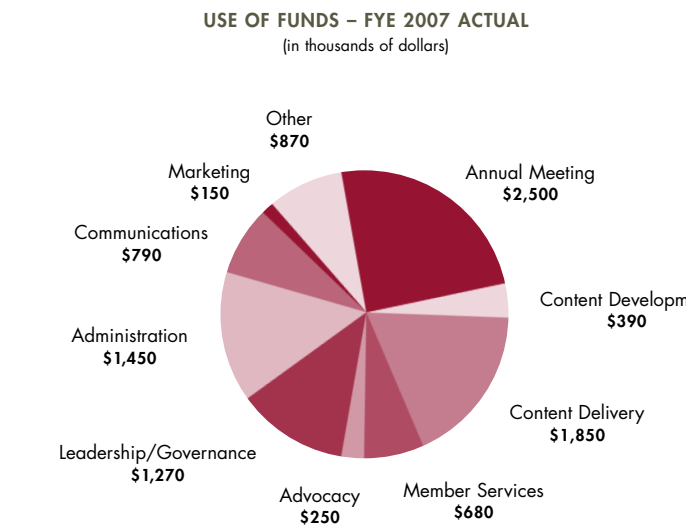
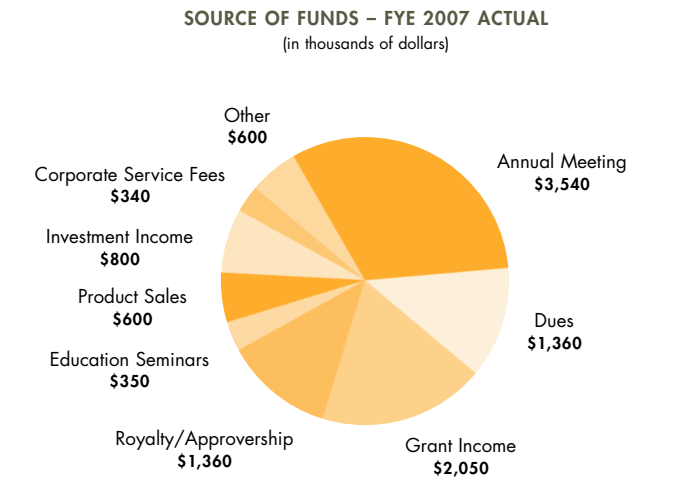
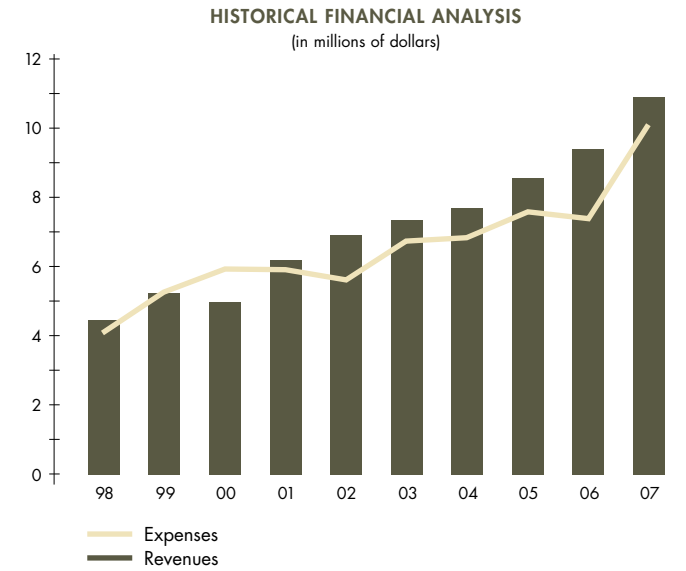
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Research

AADE ADVANCES AND PROMOTES EVIDENCE-BASED DIABETES SELF-MANAGEMENT EDUCATION AND PRACTICE.

- AADE took an historic step forward with the hiring of its first-ever Chief Science and Practice Officer, Karen Fitzner, PhD. Fitzner is responsible for recognizing trends in diabetes education, identifying new developments in the practice environment, and generating research that will contribute to the evidence base for effective patient self-management support.
- In May 2007, AADE administered its third National Practice Survey, which is a key component of our ongoing environmental scanning to identify emerging trends and changes in the profession.
- Three member surveys were conducted, assessing continuing education needs, Annual Meeting attendee demographics and impressions, and general member satisfaction.
- The AADE Education and Research Foundation awarded 33 members scholarships to attend AADE education programs.

AADE7™ SYSTEMATIC REVIEWS FURTHER EFFORTS TO DEVELOP AN EVIDENCE BASE

AADE completed a set of seven systematic reviews to determine the state of the evidence regarding each of the AADE7™ Self-Care Behaviors: Healthy Eating, Being Active, Monitoring, Taking Medication, Problem Solving, Healthy Coping and Reducing Risks. The completion of the systematic reviews marks an important step in the development of the evidence base for the profession.

AADE GRANTS PROVIDE SUPPORT FOR MEMBER RESEARCH INITIATIVES

AADE has accepted the challenge of building and maintaining a comprehensive body of knowledge about diabetes education. To this end, we supported several research grants.

Mark Peyrot, PhD, concluded his two-year study of the factors that inhibit or promote patient access to diabetes education.

The AADE Education and Research Foundation and Sigma Theta Tau International awarded the 2006–07 Sigma Theta Tau grant to Catherine Barnes, MSN, PhD, RN, for her project, *Improving Care of African-Americans with Diabetes*.

The AADE Education and Research Foundation solicited applications for two additional grants to study the impact of diabetes educator interventions on self-care behaviors.

Driving Practice



AADE SETS THE SCOPE AND DIRECTION FOR THE PRACTICE OF DIABETES EDUCATION.

AADE members received exclusive access to AADE7™ IMPACT, a series of web-based resources designed to improve and streamline the way educators manage and track patients' behavior change. Specifically, AADE7™ IMPACT includes behavior tracking tools, patient and physician communication templates and online reporting capabilities. Currently, we have 824 unique diabetes education sites registered and over 3,500 patients in the system.

Developed in partnership with the University of Pittsburgh Diabetes Institute, the AADE7™ System is the outgrowth of AADE's National Diabetes Education Outcomes System, which provided a strong practice platform and included new standards and practice guidelines.

DISCOVERY SUMMIT PLACES DIABETES EDUCATION AND THE CHRONIC CARE MODEL IN THE SPOTLIGHT

AADE hosted a summit that brought together providers, payers, patients, researchers, regulatory agencies and other healthcare organizations. Participants worked to develop a collaborative, multidisciplinary implementation model for the practice, delivery and reimbursement of chronic disease self-management training and support.

The group identified four key areas of future focus: increasing public and professional understanding of diabetes education in a chronic care setting; enhancing payment options, especially within a pay-for-performance system; developing policy and media responses to the problem of diabetes and obesity; and creating more productive community partnerships.

● AADE and the American Diabetes Association convened a joint taskforce to revise the National Standards for Diabetes Self-Management Education. Several changes were made: the AADE7™ Self-Care Behaviors were included as a useful framework for assessment and documentation of outcomes; text was inserted that allows for the use of a single educator, as long as that educator refers patients to other experts if needed; a personalized follow-up plan for on-going diabetes self-management support beyond the completion of formal diabetes education was recommended; and increased emphasis was placed on the importance of having a comprehensive CQI plan that includes outcome measures.

● In order to help with the paradigm shift from acute to chronic care, AADE forged alliances with other national healthcare organizations. We partnered with the National Diabetes Education Program to create a number of patient education materials and served on the steering committee and as liaisons for several workgroups. We were also a key stakeholder in Novo Nordisk's National Changing Diabetes Program.

● Two new position statements were developed: "Cultural Sensitivity and Diabetes Education: Recommendations for Diabetes Educators" and "Self-monitoring of Blood Glucose: Benefits and Utilization."



Professional Development

AADE PROVIDES OPPORTUNITIES FOR ITS MEMBERS AND THE BROADER HEALTHCARE COMMUNITY TO ADVANCE THEIR SKILLS AND CAREER GOALS.

● The 2006 AADE Annual Meeting and Exhibition in Los Angeles allowed nearly 3,500 educators to meet, network and learn. With a record-breaking 268 exhibitors, attendees were able to familiarize themselves with the newest and best diabetes care products, tools and strategies. More than 120 educational sessions were designed to meet the professional development needs of educators – both for beginners in the field and those with more experience.

● AADE developed video webcast programs featuring peer-to-peer discussions on issues of importance to diabetes educators. Three "Clinical Conversations" covered the topics of intra-abdominal adiposity and its associated cardiometabolic risk, emerging data on the endocannabinoid system and its metabolic role, and the role of the diabetes educator in managing cardiovascular risk.

● The *Core Concepts: The Art and Science of Diabetes Education* course was offered four times, with a total of 503 participants.

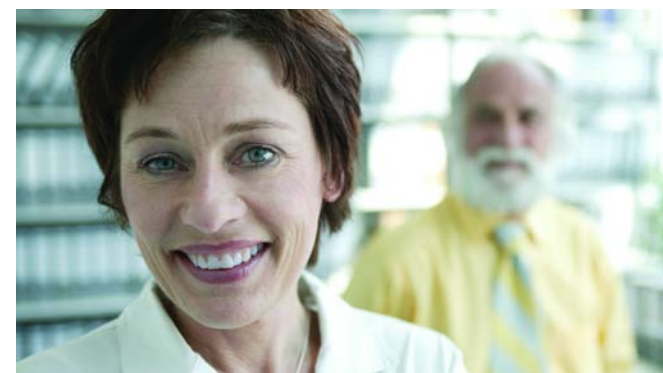
● Self-paced online education materials generated by the Corporate Symposia sessions held at the 2006 Annual Meeting allowed members to receive continuing education credit for the sessions they could not attend.

● More than 400 of the association's leaders had the opportunity to participate in a series of seminars designed to enhance their leadership skills.

● AADE offered two contract programs: "Type 2 Diabetes in Children and Youth" and "Diabetes and Obesity Management." Nearly 31 sessions were offered, which gave 1,800 participants the ability to closely examine critical issues in diabetes education.

● As an accredited approver/provider of continuing education credit, AADE approved 80 program applications for chapters and outside organizations.

● 2006–07 Diabetes Educator of the Year, Laura Hieronymus, MSEd, APRN, BC-ADM, CDE, traveled to 10 sites to present her program, "The Diabetes Educator: Taking Care of Business."



NEW EDUCATIONAL RESOURCES ENHANCE EDUCATORS' PROFESSIONAL DEVELOPMENT

A variety of new resources were developed to enhance members' career development and increase understanding of the reimbursement process.

WEBINARS

Working to expand the accessibility and value of our professional development opportunities resulted in one of AADE's greatest successes this year. In November, we instituted a series of real-time, interactive web-based seminars.

Eight webinars were offered, providing nearly 3,200 educators access to in-depth information on such topics as motivational techniques for behavior change, strategies for insulin and oral medications, setting goals for glycemia in the hospital, and gestational diabetes.

REIMBURSEMENT GUIDE FOR DIABETES EDUCATORS

To eliminate some of the complexity surrounding the reimbursement process, AADE developed the *Reimbursement Guide for Diabetes Educators*. It is made up of six individual online modules specifically designed for diabetes educators and other healthcare professionals seeking reimbursement for their specialized services.

AADE WILL ADVANCE DIABETES EDUCATION AS CENTRAL TO DIABETES CARE AND PREVENTION.

- AADE supported the effort to pass a United Nations resolution on diabetes, which occurred on December 20, 2006. To celebrate, we partnered with Novo Nordisk to send members the campaign's signature "blue circle" pin.
- AADE published its first-ever capabilities brochure which will be used to introduce the greater healthcare community and industry partners to the purpose and goals of the association.
- The AADE Executive Committee once again presented a session at the American College of Physicians' Annual Conference, entitled "Gadgets and Gizmos: Diabetes Devices Made Simple."
- The "Find an Educator" toll-free phone number and website locator continued to be widely used. Nearly 4,000 people phoned the number and even more took advantage of the website locator tool.
- We shared best practices with our international counterparts at a luncheon held during the AADE Annual Meeting. Joining us for a lively discussion were diabetes educators from Australia, Japan, the United Kingdom, Canada, South Africa, Columbia, New Zealand, Pakistan, France, Israel, the Philippines and Puerto Rico.
- AADE leadership participated in the Federation of European Nurses in Diabetes Annual Conference in Denmark, in September 2006, and the International Diabetes Federation World Diabetes Congress in South Africa, during December 2006.
- AADE continued to engage industry partners through its Industry Allies Advisory Council, which presently has 16 members: Abbott Diabetes Care, Abbott Nutrition-Ross Products, Amylin Pharmaceuticals, AstraZeneca, Bayer HealthCare, BD Medical - Diabetes Care, Eli Lilly & Company, Lifescan, Inc., Medtronic MiniMed, Merck & Co., Inc., Novartis Pharmaceuticals Corporation, Novartis Medical Nutrition, Novo Nordisk, Pfizer, Inc., Roche Diagnostics and sanofi-aventis.



PUBLIC AWARENESS CAMPAIGNS MAKE A TANGIBLE IMPACT

Strategic alliances are critical to helping us educate the public about the link between diabetes and related health conditions. This year we spearheaded many different unbranded awareness campaigns, allowing us to make progress on our educational goals and providing us with an opportunity to highlight the role of diabetes educators:

THE 7 HABITS OF HIGHLY SUCCESSFUL PEOPLE WITH DIABETES

AADE partnered with author Stephen Covey, PhD, and Bayer Diabetes Care to create a consumer education booklet, "The 7 Habits of Highly Effective People with Diabetes," which brings together the AADE7™ Self-Care Behaviors and Covey's *7 Habits of Highly Effective People*.

TAKE CHARGE. TALK T. WHAT MEN WITH DIABETES NEED TO KNOW ABOUT LOW TESTOSTERONE

We entered the third year of this campaign with Solvay Pharmaceuticals by expanding our scope to include more patient venues and initiating outreach with the physician community.

STEP FORWARD FROM DIABETIC NERVE PAIN

Diabetic nerve pain and proper foot care were the messages of a campaign with Pfizer, Inc. AADE members volunteered their time, speaking to more than 140 community groups.

DIABETES TEAM TOGETHER EVERYONE ACHIEVES MORE

We joined forces with Merck & Co., Inc. and the American Association of Clinical Endocrinologists on a campaign to promote a team approach to treating type 2 diabetes.

DIABETES MANAGEMENT SURVEY

AADE co-sponsored a consumer survey with Nutrition 21 that sought to determine the challenges people with diabetes face during the holidays.

GO INSULIN

We joined sanofi-aventis in an effort to raise physician awareness of diabetes educators and to educate doctors about calming patients' fear of insulin injections.

NATIONAL DIABETES EDUCATION WEEK

AADE promoted the week with a member give-away of the *Live life to the fullest: Team up with a diabetes educator* brochure and poster. More than 65,000 brochures were distributed.

NATIONAL CONSUMER AWARENESS CAMPAIGN PUT AADE7™ IN THE SPOTLIGHT

AADE launched its first self-directed consumer education campaign. *Side-by-Side: A Partner Approach to Diabetes Self-Care* emphasized the importance of partners in care – physicians, diabetes educators, other healthcare professionals, family and friends – and highlighted the benefits of working with a diabetes educator.

We aimed to empower patients to take control of their diabetes by using the AADE7™ Self-Care Behaviors as a framework for setting goals and as a language for discussing their diabetes with members of their care team.

To effectively deliver the campaign's message, 21 AADE members served as local ambassadors, conducting educational seminars in their communities. A patient guidebook, printed in English and Spanish, and website were also developed.

Advocacy

AADE ADVOCATES FOR PUBLIC POLICY TO IMPROVE ACCESS TO SERVICES, SUPPLIES AND CARE FOR THOSE WITH DIABETES OR FOR THOSE AT RISK FOR DIABETES AND RELATED CONDITIONS.

- The Public Affairs Committee's name was changed to the Advocacy Committee to better reflect AADE's Strategic Plan.
- Our Chapter Legislative Coordinator network expanded this year to better meet state-level needs.
- We made progress in forging a relationship with the Centers for Medicare and Medicaid Services (CMS) on diabetes self-management training issues.
- AADE partnered with the American Association of Clinical Endocrinologists, National Community Pharmacists Association and the National Association of Chain Drug Stores to successfully ensure that the competitive bidding program proposed by CMS allows for patients to receive the diabetes equipment and supplies their physicians determine are most appropriate.
- AADE joined the Partnership to Fight Chronic Disease, a bipartisan coalition of healthcare stakeholders, to launch a nationwide campaign to make preventing and treating chronic disease the top healthcare issue in the 2008 presidential election.
- AADE joined the Diabetes Atlas (D-Atlas) project advisory board. D-Atlas is an online tool for profiling type 2 diabetes prevalence in the United States.
- In the company of many other legislative proposals that the 109th Congress failed to enact in 2006 was "The Diabetes Self-Management Training Act." This legislative proposal will be reintroduced in both the House and Senate in the 110th Congress.

PUBLIC POLICY BRIEFS CLARIFY ASSOCIATION STANCE ON LEGISLATIVE ISSUES

The Advocacy Committee continued to develop public policy briefs on issues important to members. Two additional briefs were approved this year:

The **GEstational Diabetes (GEDI) Act of 2007**, which calls on Congress to enact legislation to address the issue of increased prevalence of gestational diabetes and its treatment.

The **Diabetes Screening and Medicaid Savings Act**, which seeks congressional support for legislation to provide the Medicaid population with increased prevention, early detection and self-management services.



Membership

AADE CONTINUES TO ENHANCE THE EFFECTIVE AND EFFICIENT OPERATION OF ITS MEMBER-DRIVEN ORGANIZATION.

● AADE experienced a 7% growth in membership this year. The association is now comprised of more than 12,000 educators from diverse backgrounds and specialty areas. The discipline breakdown is approximately: 50 percent registered nurses, 29 percent registered dietitians, 8 percent advanced practice nurses, 5 percent pharmacists and 8 percent other healthcare professionals.

● Three new chapters received their charter: Maine Association of Diabetes Educators, Puerto Rico Association of Diabetes Educators in Action and the Wyoming Association of Diabetes Educators.

● Membership in specialty practice groups rose 19 percent. Also, a new specialty practice group dedicated to continuous glucose monitoring was formed.

● A new committee was formed to serve as a sounding board for the development of materials and initiatives relating to the recruitment and retention of new members.

● A traveling ambassador program, made up of past chairs of the Chapter Presidents Council, was established to encourage collaboration and connectedness between the national organization and local chapters.

● We launched a recruitment campaign that relies on current members to tell colleagues about the numerous benefits of an AADE membership.

● New members learned about the association and its initiatives by accessing our first-ever podcast for new members.

AADE IN PRACTICE OFFERS PRACTICE-BASED TOOLS AND STRATEGIES FOR DIABETES EDUCATION

As a direct result of member survey input, AADE launched a new quarterly publication focusing on the practical application of current research and best practices in diabetes education. *AADE in Practice* bridges the gap between the research-focused journal, *The Diabetes Educator*, and the association-focused *e-FYI* newsletter.

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American Diabetes Association Government Affairs
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American Diabetes Association National Standards Revision Workgroup
Linda Siminerio, PhD, RN, CDE
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American Heart Association

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American Heart Association Nutrition, Physical Activity and Metabolism

Mary Austin, MA, RD, CDE

American Nurses Association Roundtable

Malinda Peeples, RN, MS, CDE

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National Diabetes Education Program

Christy Parkin, MSN, RN, CDE

National Diabetes Education Program Business and Health Strategy

Roger Austin, MS, RPh, CDE

National Diabetes Education Program Gestational

Julie Slocum, MS, RN, CDE

National Diabetes Education Program Older Adults

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