

JAZZ IT UP
WITH INNOVATION
AND EXCITEMENT

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AADE American Association
of Diabetes Educators



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**BC-ADM – What’s New? – Role
Delineation and More**

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Presenters: Barb Schreiner, PhD, APRN, CDE, BC-ADM, CPLP - None
Leslie Kolb, MBA, BSN, RN - None

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Learning Objectives

- Evaluate the value of BC-ADM credential.
- Appraise strategies for exam preparation.
- Utilize available study resources.
- Summarize the criteria for recertification
- Review the future and value of the BC-ADM

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What is it?

The BC-ADM skillfully manages complex patient needs and assists patients with their therapeutic problem-solving. Within their scope of practice, healthcare professionals who hold the BC-ADM certification may:

- Adjust medications
- Treat and monitor acute and chronic complications and other comorbidities
- Counsel patients on lifestyle modifications
- Address psychosocial issues
- Participate in research and mentoring

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Current BC-ADM Professionals

- 930 professionals are certified with BC-ADM
 - APRN – 49%
 - Pharmacist – 19%
 - RN – 15%
 - RD – 11%
 - Other – <6% (MD/DO, PA and CNS)
- Pass rate = 72%

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Fun Facts

- When AADE took over exam there were 650
 - Growth approx. 46%
- It was not open to:
 - MD/DO
 - PA
- BC-ADM was written into the National Standards in 2012

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Value of the BC-ADM Credential

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Evolving Role of Clinicians in Diabetes Management

- In 1986, the CDE credential became available, which helped clinicians become recognized as experts in "diabetes education"
- The CDE credential became a prerequisite for diabetes care in a variety of settings

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Evolving Role of Clinicians in Diabetes Management

- In early 1990, the DCCT trial introduced the concept of the team approach
- DCCT had dietitians and RNs providing effective clinical care to successfully manage diabetes
 - the concept of diabetes management shifted from education to providing research-based clinical care by experts
- A solid clinical knowledge base became imperative to ensure the quality of clinical care required to manage diabetes patients

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Evolving Role Continues

- To advance the role of practitioners in the area of diabetes management, AADE introduced the concept of developing an advanced-practice nursing credential with a specialty in diabetes
- Due to the multidisciplinary nature of diabetes care, dietitians, pharmacists, NPs, and recently MDs & PAs, were also offered the opportunity to obtain the BC-ADM credential

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Maintaining the Integrity of the BC-ADM Exam

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Role Delineation Study: What and Why

- Best practice in test development
- Assesses current practice newly credentialed
- Assures exam relevant, reflects current practice
- Measures frequency and importance of tasks, relevance to eligible disciplines
- Conducted:
 - Every 5 years
 - With significant changes to eligibility

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Role Delineation Study: How

- Content experts meet to review and re-categorize the test content outline
- Survey developed with testing company
- BC-ADM Candidates and sample of newly eligible category are surveyed.

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BC-ADM content outline

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Domain 1: Assessment and Diagnosis

1. Therapeutic interviews
2. Comprehensive history & physical exam across lifespan
3. Physiology and pathophysiology
4. Self-care behavior & mental health assessment
5. Health care resource assessment
6. Standards of diabetes care & clinical practice guidelines
7. Analysis of complex data sets
8. Screening & diagnostic criteria
9. Synthesis of information from assessment & diagnostic tests
10. Formulation differential dx/prioritization of problem list

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Domain 2: Planning and intervention

1. Standards of diabetes care and clinical practice guidelines pertaining to intervention
2. Nutrition and exercise prescription
3. Pharmacologic therapy options and interventions to manage diabetes and related conditions
4. Surgical options for diabetes management, including their risks and benefits
5. Technology options
6. Individualization and prioritization of care
7. Collaboration and coordination of care

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Domain 3: Evaluation and follow up

- Goal setting using AADE7 Self Care Behaviors
- Standards of diabetes care and clinical practice guidelines pertaining to follow-up care
- Patient outcomes and expected treatment results reflecting evidence-based practice
- Goal achievement
- Plan modification

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Domain 4: Leadership and Advanced Professional Practice

- Regulatory, accreditation/recognition, disease management, and reimbursement programs and standards for institutions and providers
- Program development and Continuous Quality Improvement
- National health initiatives, prevention strategies, and public health and policy trends
- Scholarship
- Community programs and outreach

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How to Prepare for the Exam

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Studying for the Exam

- How the test is constructed
- Your test taking resources
- How to harness test anxiety

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Know the Test

- Types
- Time limits
- Questions
- Guessing

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Test Construction Blueprint

Category	Domains of Practice	No. of Questions	Percent
I	Assessment and Diagnosis	47	31%
II	Planning and Intervention	48	32%
III	Evaluation and Follow-up	37	25%
IV	Leadership and Advanced Professional Practice	18	12%
Total		150	100%

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Test Taking Resources

- Test taking skills
- Study resources
- Practice test
 - 75 questions that will help you prepare for the exam
 - Reflects current exam content and includes items that reflect tasks and knowledge across the 8 domain areas of advanced diabetes management
- Cost = \$95

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Test preparation- "Know thyself"

- Identify your best time of day.
 - Tune into your biorhythm
- Identify your preferred learning style
 - Orally
 - Visually
 - Written
 - Kinesthetically
- Identify your space
 - Do you study better in seclusion?

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Test preparation- Content

- Develop study plan
- Know amount of content
- Develop time line
- Organize content
- Prioritize content on your strengths and weaknesses
 - Most important at first and last of each session
- Study in short bursts
- Take breaks

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Exam Preparation

- Construct hypothetical scenarios and sample questions
- Make study appointments
- Use study groups

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Harnessing Test Anxiety

- Use anxiety busting skills
 - Keep test in perspective
 - Cognitive restructuring
 - Use statistics: Play the odds
- Practice relaxation and meditation techniques
- Rest well the night before

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Harnessing Test Anxiety

- Arrive early; avoid others if that increases anxiety
- Consider self-fulfilling prophecies
 - Positive thinking and affirmations lead to positive results
- Eliminate negative thinking

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Harnessing Test Anxiety: Thoughts

- Challenge automatic thoughts
 - What is the evidence for what I am thinking?
 - Are there other possible interpretations?
 - Am I confusing a thought with a fact?
 - Am I overlooking my strengths?
 - What's the worst that could happen?
 - If the worst happened, would it be so bad?
 - What good does it do to focus on these thoughts?
- What would you tell a friend
- Replace "I am anxious" with "I have anxiety"

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Test taking Strategies: Anatomy of a test item

The color of the sky at midnight is:

- A) Green
- B) Orange
- C) Blue
- D) Black

Stem

Distractors

Answer

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Test Taking Strategies

- Focus on the stem
- Read every option
- Look for strategic words
 - Best, first, immediately, most appropriate, most likely, initial, next, primary
- Consider
 - Safety needs
 - Gathering more data

Silvestri, L.A. (2010). Saunders Comprehensive Review for the NCLEX-RN Examination (5th ed).

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Working the Test

- Pace yourself:
 - Estimate amount of time per question
 - Know where you are at halftime
- Use ALL the time allowed
- No blanks- answer all – guess
- Changing answers?
- Avoid careless errors

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Working the test: common errors

- Avoiding the easy answer; thinking you need a complicated answer
- Missing an important word ("most important", "best", "usually")
- Ignoring the patient's characteristics
- Being thrown by a technical term
- Looking for a "right" answer which is not among the choices
- Selecting a response which is idealistic, controversial, or unrealistic

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Working a test item

A common symptom of cardiovascular autonomic neuropathy is:

Heart
Autonomic- not feet
Complications

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Working a test item

A common symptom of cardiovascular autonomic neuropathy is:

A) Fixed heart rate
 B) Tachycardia with exercise
 C) Headaches
 D) Burning and numbness in feet

Heart Autonomic- not feet Complications

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Working a test item

Necrobiosis lipoidica diabetorum typically occurs on the patient's:

A) Shins
 B) Thighs
 C) Elbows
 D) Back



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Working a test item

A patient mistakenly takes an extra 10 units of Humalog insulin in the morning dose. The advanced diabetes manager would expect the patient's blood glucose to:

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Working a test item

A patient mistakenly takes an extra 10 units of Humalog insulin in the morning dose. The advanced diabetes manager would expect the patient's blood glucose to:

Ask yourself:
 What will happen?

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Working a test item

A patient mistakenly takes an extra 10 units of Humalog insulin in the morning dose. The advanced diabetes manager would expect the patient's blood glucose to:

A) Decrease in 1 to 2 hours
 B) Increase in 6 to 8 hours
 C) Increase in 1 to 2 hours
 D) Decrease in 6 to 8 hours

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Working a test item

An 84-year-old patient with class 2 New York heart failure was diagnosed with type 2 diabetes and started sitagliptin (Januvia) 50 mg daily one month ago. The patient's current A1C level is 7.1% and creatinine clearance is 28 mL/min. The advanced diabetes manager's recommendation is to:

A) Add glyburide (Micronase)
 B) Add metformin (Glucophage)
 C) Increase the Januvia dose
 D) Reduce the Januvia dose

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Working a test item

A 15 year old with type 1 diabetes rarely consumes milk products and asks about beginning calcium supplementation. The advanced diabetes manager's recommendation is to:

- A) Ingest calcium 1000 mg daily without Vitamin D.
- B) Ingest calcium-fortified food products.
- C) Decrease the patient's use of sunscreen.
- D) Take vitamin D 400 IU daily.

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Now it is Your Turn to Develop a Strategy

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BC-ADM Self-Assessment of Content Knowledge		
Domain 1: Assessment and Diagnosis Content Knowledge	Rating Scale:	
Domain 1 - 10 Subdomains	1 = Understands 90% of the content, requires little review 2 = Understands 75% of the content, minimal review 3 = Understands 50% of the content, extensive review 4 = Understands <10% of the content, start from the beginning	
	Self Rating	Plan
Subdomain 1: Therapeutic interviews (e.g., motivational interviewing, open-ended questions)	7 Items on the exam	
a. Motivational interviewing techniques		
b. Most effective interview style for various situations		
Subdomain 2: Comprehensive history and physical exam techniques across the lifespan (e.g., functional status, sensory, fundoscopic, medication and complementary alternative medication review)	6 Items on the exam	
a. Techniques for obtaining medical, family, and social history		
b. Medication therapy: prescription medications, over-the-counter medications, complementary alternative medicine, and patient adherence		
c. Techniques for obtaining nutrition and exercise history		
d. Developmental and mental status		
e. Cultural, ethnic, health literacy, and		

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Report Out!!!

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Frequently asked Questions

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Frequently Asked Questions

How are Clinical Practice Hours defined?

- First time candidate: minimum of 500 clinical practice hours (after licensure) within 48 months prior to applying for this certification exam
- Renewal: minimum of 1000 practice hours related to your role as an advanced diabetes manager must be completed within the 5 years preceding the postmark on your renewal application submission
- The scope of advanced diabetes management includes patient management skills such as medication adjustment, MNT, exercise planning, counseling for behavior management and psychosocial issues

How do I document my Clinical Practice Hours?

- On the application, you can provide the Institution, Supervisor, Start/End date and Clinical practice hours for the 500 total clinical hours you are reporting.
- Only candidates selected for audit will be asked to provide supporting documentation to verify the information provided in the application.

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Frequently Asked Questions

What resources can I use to study for the exam?

- Practice test
- List of resources found on page 18 of the applicant handbook
- Test taking tips found in the handbook

Once I take the exam how long before I get the results and how will I be notified?

- Examination results will be mailed within 6 – 8 weeks from the close of the testing window.
- The exam is offered in June and December and the close of the testing window is the first day of the following month, i.e., the June test window closes on July 1st and the December test window closes on January 1st.
- Examination results will be released only in writing by mail, not by telephone or fax.

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Frequently Asked Questions

What is the difference between certification and licensure?

- No certification changes scope of practice
- Licensure comes from state

What is the difference between the CDE and the BC-ADM? Do I need both?

- CDE is a Level 2 Diabetes Educator – Focus is on education
- BC-ADM is a Level 3 Diabetes Educator – Focus is on Management of the person with diabetes
- You do not need both

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PANEL DISCUSSION

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Questions



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