Explore and Embrace the AADE Practice Competencies

Disclosure to Participants
Notice of Requirements For Successful Completion
Please refer to learning goals and objectives.
In order to claim continuing education credit/hours for this activity, please stay for the entire presentation and complete the evaluation.

Conflict of Interest (COI) and Financial Relationship Disclosures:
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Diabetes Educator Competencies
Work Group Members

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• Nathan Painter, PharmD, CDE
• Margaret M. Maloney, MA (AADE Staff)
Objectives

- Program Objective
  - Improve understanding and use of the new competencies in the spectrum of diabetes educator practice levels.

- Learning Objectives
  - Identify competency requirements for each practice level
  - Discuss flow of competencies through practice levels and domains
  - Identify 3 applications of competencies in a variety of practice settings

AADE's Professional Practice Documents & Resources

- Scope of Practice
- Standards of Practice
- Standards of Professional Performance

AADE's Definition of Diabetes Self-Management Education & Support

- An interactive, collaborative, ongoing process involving the person with diabetes and the educator(s).
- DSMES is accessible, planned, individualized, documented and evaluated.

Origins of the Competencies
History of Competencies

- 2006: Workgroup(s)
- 2009: Guidelines and competencies
- 2013: Workgroup
- 2014: Revised practice levels
- 2015: Revised competencies

Purpose of Competencies

- Provide a master list of minimal knowledge and skills needed across the continuum of care for each practice levels.
- Used as structure and guidelines for diabetes program development, training, education and staff support.
- Flexible for diabetes education programs in multi-faceted health care and education settings.

Dreyfus Model

- Novice
- Experienced Beginner
- Practitioner
- Knowledgeable Practitioner
- Expert

Paraprofessional

Level 2

Level 1

Purpose of Practice Levels

- To increase access to diabetes self-management education and support and achieve better patient care

Diabetes Educator

Level 3

Level 2

Level 1

Purpose of Competencies
Other Organizations using a Competency Format

- Academy of Nutrition and Dietetics has competencies for RD/N and NDTR levels.
- American College of Clinical Pharmacy
- National League of Nursing provides competencies across spectrum of practice LVN-PhD.
- American Board of Medical Specialists.
- American Academy of Professional Coders

Domain 1: Pathophysiology, Epidemiology, and Clinical Practice of Prediabetes and Diabetes

Demonstrates familiarity with pathophysiology, epidemiology, and clinical practice consistent with practice level.

Domain 2: Cultural Competency Across the Lifespan

Provides diabetes support and care in a culturally-competent manner across the lifespan.

Domain 3: Teaching and Learning Skills

Applies current principles of teaching and learning and/or behavior change to facilitate self-management education. Contributes to community professional development.

Domain 4: Self-Management Education

Works with an interdisciplinary diabetes care team to tailor interventions to individual self-management education needs.

Domain 5: Program and Business Management

Applies principles of program and/or business management to create a climate that supports successful self-management of diabetes.

How to Read the Competencies

Under each domain and within each practice level there are objectives that outline the roles and responsibilities for that level.

Example: Domain 5: Program and Business Management
Competency: Applies principles of program and/or business management to create a climate that supports successful self-management of diabetes.

<table>
<thead>
<tr>
<th>Level</th>
<th>Objectives</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diabetes Paraprofessional, Level 1</td>
<td>Validates the role of the healthcare team members.</td>
</tr>
<tr>
<td>Diabetes Paraprofessional, Level 2</td>
<td>Operates within professional lines of responsibility and contribution.</td>
</tr>
<tr>
<td>Diabetes Educator, Level 1</td>
<td>Participates in the development, implementation, and evaluation of policies, procedures, and protocols relevant to program management.</td>
</tr>
</tbody>
</table>

How to Access the Competencies


Poll

- Have you accessed the competencies?
Applications for Competencies

- Academic Settings
- Clinical Settings
- Program Settings

Clinical Setting

- 2-3 key competencies identified for the AADE7 Self-Care Behaviors™ as well as teaching/learning.
  - Example:
    - Taking Medications
      - Identifies issues with adherence, including barriers with taking/obtaining medications as prescribed.
      - Teaches/nurtures safe disposal of sharps.
      - Identifies and explains the differences between prescribed and injectable medications for diabetes.

- Self-Assessment survey created to identify gaps in knowledge.
- Education content geared toward knowledge gaps

Academic Setting

- Developing curriculum
- Updating course content

Clinical Setting

- Rural hospital
  - Job description
- Rural clinic
  - Professional development

Clinical Setting

- Curriculum and Training for Physician Practices
  - Identified need to improve staff knowledge of diabetes
  - Large physician practice identified to pilot with goal to spread to all physician practices
  - Workgroup established to develop education plan
  - AADE competencies used to establish core competencies for ALL staff (nonclinical and clinical)
  - Self-assessment questions created for each competency
  - Results from self-assessment questions used to create education curriculum

Program Setting

- Standard Five
  - Individuals who serve as lay health and community workers and peer counselors or educators may contribute to the provision of DSME instruction and provide DSMS if they have received training in diabetes management, the teaching of self-management skills, group facilitation, and emotional support
Process

- For these individuals, a system must be in place that ensures supervision of the services they provide by a diabetes educator or other health care professional and professional back-up to address clinical problems or questions beyond their training.

Example

<table>
<thead>
<tr>
<th>Domain 1</th>
<th>Pathophysiology, Epidemiology and Clinical Practice</th>
</tr>
</thead>
<tbody>
<tr>
<td>Competency</td>
<td>O</td>
</tr>
<tr>
<td>List common complications related to diabetes</td>
<td>x</td>
</tr>
<tr>
<td>Describes the difference between prediabetes and diabetes</td>
<td>x</td>
</tr>
<tr>
<td>List s/s of hypoglycemia</td>
<td>x</td>
</tr>
<tr>
<td>Recognizes s/s of hypoglycemia and treatment as needed</td>
<td>x</td>
</tr>
</tbody>
</table>

Paraprofessionals 1 and 2

Gained through supervision and mentorship

Primary Function

Skill

Information

Diabetes Educators 1, 2, and 3

The depth of each of these functions depends on the level and diversity of the educator’s experience and background in the field.

Application

Skill

Knowledge

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• Burke, SD; Mensing, C. The Diabetes Educator Career Path: Revised practice levels of practice. Unpublished report. AADE. Chicago, IL. 2014.
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Questions?

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Thank you very much