

The cover features a dark blue background with a fine, light-colored grid pattern. A large, stylized red arrow points from the left towards the center. Overlaid on the right side is a circular graphic consisting of several concentric white lines with small white dots at their intersections, resembling a target or a network diagram. The text 'Strategic Plan' is in a light grey, sans-serif font, and '2013-2015' is in a larger, bold, white, sans-serif font, both centered within the circular graphic.

Strategic Plan
2013-2015



The key to a strong, responsive organization is a clearly defined mission, complete with specific goals and intended outcomes. Our strategic goals are essential to the association's work; they provide a rationale and a frame of reference for the initiatives we launch and they give us a destination and a roadmap for the future.

Every three years, AADE assesses its members' current needs and accomplishments, and determines a set of goals for the near future that support our overarching mission and vision.

To this end, AADE's leaders have set an ambitious and proactive course for 2013-2015. This was done through careful examination of the trends shaping diabetes self-management education, health care and associations. It also involved broad input from members and conversations with industry stakeholders and thought leaders. These trends and feedback were examined through multiple lenses and resulted in an ambitious plan that is also grounded in reality.

"Our 2013-2015 priorities reflect broad input from members and industry thought leaders. They reflect careful study and dialogue about the forces shaping change for our diabetes educator colleagues and for AADE. It's been an important journey of learning."

— *Sandi Burke, PhD, ANP, BC-ADM, CDE, FAADE*
2012 AADE President

This report highlights AADE's 2013-2015 goals and strategies for success, as well as our plan for measuring progress.

We invite you to be our partner during these next three years as we work towards advancing our shared mission and vision.

AADE Mission: Empower healthcare professionals with the knowledge and skills to deliver exceptional diabetes education, management and support

AADE Vision: Optimal health and wellness for all people with diabetes and related chronic conditions

HIGH LEVEL TRENDS IMPACTING DIABETES EDUCATORS

Setting direction requires a clear understanding of the drivers of change and their potential impact for AADE, diabetes educators and the public we serve. This is a time of profound change in health services delivery, particularly in the areas of consumer engagement and the use of technology. Beginning with the growing incidence and consequences of diabetes nationally and internationally, there are several impactful trends for diabetes self-management education, diabetes educators and AADE.

- More than 26 million Americans have been diagnosed with diabetes and more than 79 million adults have pre-diabetes. CDC projects that as many as one in three U.S. adults will have diabetes by 2050 if current trends continue. Worldwide prevalence is estimated at 347 million people.
- The next decade will be characterized as a period of experimentation in patient care delivery models and payment approaches. Health system resource limitations and the emergence of personal health technologies will place greater responsibility on patients and families for their own self-care.
- The current growth rate of the diabetes educator workforce will not keep pace with the needs of the population of people with diabetes and related conditions.
- New care models and technology for diabetes self-management will emerge, supporting targeted and personalized management.
- The roles and competencies of diabetes educators will be adapted to serve patients in new ways and to more effectively impact population health.

“Effective self-management is critical to living with diabetes. As diabetes educators we have much to share about how to support patients in the continuum of care. At the same time, we have much to learn about using new technologies as well as working as team members in the patient-centered medical home and other emerging healthcare delivery models.”

— Donna Tomky, MSN, RN, C-NP, CDE, FAADE
2011 AADE President

HIGH LEVEL TRENDS IMPACTING ASSOCIATIONS

Associations play a unique role in society and in the professional lives of their members. But like all institutions in today's competitive and economically challenging times, associations can't assume that what was successful in the past will meet member needs in the future. Key challenges facing AADE as it strives to be a top-notch professional partner to its members in the years ahead are many.

AADE has a strong record of performance, but we all know that yesterday's success doesn't guarantee tomorrow's. Our 2013-2015 direction and priorities reflect the challenges, but also the great opportunities for the field and the association in the coming years."

— Charles Macfarlane, FACHE, CAE
AADE Chief Executive Officer

There is greater competition for members' time, attention and support, which impacts member loyalty and can limit volunteerism.

- The average age of members is rising, particularly among some health professional groups, and a wave of retirements will occur over the next decade.
- Younger members want and need different things from their association and have many alternative resources. As a new generation of professionals prepares to lead associations, it can be expected that leadership style, culture and values will be impacted.

- Associations are challenged to personalize the value of their services to meet the needs of the individual member.
- Associations must leverage technology in ways that help members succeed in practice.
- Associations continue to be a trusted source for standards and research that influence and shape policies and contribute to improved performance of members and stakeholders.
- Associations are challenged to become more transparent and accountable for how they achieve their mission and uphold their values.

LOOKING BACK FROM THE FUTURE

Planning for the future, particularly in times of rapid change, can be challenging. While it's tempting to assume that we should continue to do the same things that made us successful in the past, this ignores the evolving trends in the external environment. We also need to guard against assuming that the future will play out along a single path when we know there are plausible alternative futures. Setting an effective direction requires a focus on factors external to the organization and consideration of a range of possibilities. To shape AADE's direction and priorities for the next three years, the AADE Board of Directors looked forward to 2016 and considered several alternative futures based on anticipated changes in healthcare delivery and chronic disease management.

As part of an exercise called scenario planning, AADE’s leaders created stories about what diabetes self-management education in the year 2016 might look like, as highlighted in the chart below. A state of continued fragmented diabetes and chronic disease management and marginal healthcare delivery and payment reform is represented as *Same Song, New Verse*. *Bottoms Up* outlines

a scenario where there are improvements in comprehensive diabetes care in spite of a marginally improved health system. *Where is Waldo’s Diabetes Education* assumes a transformed health system with lagging chronic disease management improvements. Lastly, *Brave New World* assumes both major improvements in chronic disease and the health system.

2016 SCENARIO PARAMETERS

HEALTH CARE DELIVERY AND PAYMENT REFORM

MARGINAL

TRANSFORMING

DIABETES AND CHRONIC DISEASE ENVIRONMENT

FRAGMENTED

COMPREHENSIVE

SAME SONG, NEW VERSE

- Continued rise in health care costs
- Shrinking diabetes education resources due to budget constraints
- More difficult to provide effective diabetes education because of resources

BOTTOMS UP

- Empowered patients “occupy” health care to urge reform forward.
- Islands of diabetes care excellence that value diabetes education
- Leverage consumer-centered resources
- Broader definition of primary care

WHERE IS WALDO’S DIABETES EDUCATION

- New delivery models, but diabetes care coordination lags
- Emphasis on preventive care, but insufficient for diabetes needs
- Improved care coordination for some chronic conditions, siloed care continues for diabetes

BRAVE NEW WORLD

- Value and outcomes from effective chronic disease management demonstrated
- Comparative effectiveness and care algorithms supported by research
- Consumer consciousness of consequences of lifestyle decisions
- Effective use of technology for care, communication and for self-management

These stories informed thinking about what AADE must do over the coming years to support its members whose professional lives will not neatly fit into one future, but will reflect the full range of futures described in the various scenarios.

AADE's Direction for 2013-2015

Key to determining AADE's 2013-2015 strategic direction and priorities was a review of the association's mission and vision statements. While the vision statement was still relevant, the mission statement required an update.

Mission and vision statements are uniquely important for associations and serve as their navigational north star. The mission statement describes why the association exists and whom it serves. The vision articulates the association's aspirations for the ideal future.

AADE's new mission statement — *Empower healthcare professionals with the knowledge and skills to deliver exceptional diabetes education, management and support* — better reflects our role as a member-focused association.

In developing the plan, we looked at our various stakeholders and determined what they need from the association, established what we wanted to achieve over the next three years in the form of goals and strategies and then determined our measurement vehicle.

AADE'S 2013-2015 GOALS AND STRATEGIES

Priority: Invest in Diabetes

Educators:

Purpose: Empower diabetes educators to become more effective in their careers.

Strategies:

- 1 Support the professional growth of diabetes educators through the development of a more defined career path and targeted training opportunities.
- 2 Build a comprehensive, online AADE Knowledge Center to serve as a central repository for diabetes self-management education knowledge and resources.
- 3 Advocate for and improve the member knowledge of reimbursement and payment models.
- 4 Actively engage members and expand their volunteer opportunities.

Priority: Advance Diabetes

Population Health

Purpose: Evaluate, document and advance the role of diabetes educators in improving outcomes for people with diabetes, and within emerging health-care delivery models.

Strategies:

- 1 Demonstrate the value of diabetes education expertise in various health-care management settings through expanded quantitative and qualitative research.

- 2 Improve the capture and use of diabetes self-management education in health information technology.
- 3 Increase the number of qualified diabetes educators through the development and promulgation of model academic curricula for health professional education.

Priority: Empower People with Diabetes

Purpose: Heighten awareness of the power of diabetes self-management and the value of diabetes educators; and provide resources that enable people with diabetes to become agents of change.

Strategies:

- 1 Build awareness of the value of diabetes self-management education among the public, healthcare professionals, governmental agencies, and third-party payers.
- 2 Expand evidence-based tools, resources and education for people with diabetes to enable them to effectively advocate for diabetes self-management.

Priority: Expand AADE's Capacity

Purpose: Ensure that AADE's members, processes, people, and technology systems are positioned to effectively deliver planned services to stakeholders.

Strategies:

- 1 Develop and execute an association technology enhancement plan to better engage members, and more fully use technology and information to improve organizational performance.
- 2 Enhance the ability of the AADE Education and Research Foundation to serve its public mission and various stakeholders.
- 3 Increase financial return from products and services, allowing AADE to invest in additional resources that benefit its members.

LEARNING THROUGH CHANGE

The first phase of AADE's three-year plan is moving forward. But it is dynamic and will be updated as new issues and opportunities arise. There's no such thing as a fixed plan in today's fast-paced world, and so our shared journey of learning will continue.

"The Board of Directors is excited about AADE's direction! We invite you to step alongside us and participate in whatever capacity you are able. There are many volunteer opportunities to get engaged, and to share with us what you learn in your practice. It is essential that each of us do all that we can to advance AADE's important mission and vision."

—Tami Ross, RD, LD, CDE
2013 AADE President

2013-2015 STRATEGIC DIRECTION

MISSION: Empower healthcare professionals with the knowledge and skills to deliver exceptional diabetes education, management and support

VISION: Optimal health and wellness for all people with diabetes and related chronic conditions

STAKEHOLDER VALUE	MEMBERS "Provide me with essential resources so I can be effective and advance my career"		EMPLOYERS/INDUSTRY "Supply me with qualified experts and information on best practices and results"	THE PUBLIC "Qualified people to help me succeed with self-management"
GOALS	INVEST IN DIABETES EDUCATORS	ADVANCE DIABETES POPULATION HEALTH	EMPOWER PEOPLE WITH DIABETES	EXPAND AADE'S CAPACITY
STRATEGIES	1. Career Development 2. Knowledge Center 3. Advocacy 4. Engagement	5. Care models and DSME 6. Health IT and DSME 7. Workforce Development	8. Public Awareness 9. Public Information	10. AADE Technolgy 11. AADE Foundation 12. Products/Services
ACCOUNTABILITY	ANNUAL MILESTONES AND MEASURES			
	BALANCED SCORECARD PERFORMANCE MEASURES			