National Competencies for Credentialled Diabetes Educators





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Version control table

Review frequency – 3 years

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Abstract

The ADEA National Competencies for Credentialled Diabetes Educators (CDEs) describes the core knowledge, education and skills CDEs must possess as they move through the ADEA credentialling pathway, from initial credentialling as a novice CDE through to re-credentialling in the proceeding years to retain competence in the field of diabetes education, management and support, working in Australia. The National Competencies for Credentialled Diabetes Educators also inform the accreditation guidelines for the Graduate Certificate courses in Diabetes Education and Management in Australia.

Keywords

Competency: can be defined as "the state of having the knowledge, judgement, skills, energy, experience and motivation to respond adequately to the demands of one's professional responsibility" (1).

Competency standards: are a set of benchmarks used to assess the skills and knowledge of a person. They are used as a basis for defining learning outcomes and assessing performance within a professional practice. They specify knowledge and skill, and the application of that knowledge and skill, in the workplace.

Capability: encompasses competency and includes technical skills, adaptability to change, life-long learning and self-efficacy.

Continuing Professional Development (CPD): is how health practitioners maintain, improve and broaden their knowledge, expertise and competence, and develop the personal and professional qualities required throughout their professional lives (2).

Scope of practice: the procedures, actions and processes in which a health professional is authorised, educated and competent to perform (3).

Standards of Practice: a framework that outlines the nationally acceptable level of practice for Credentialled Diabetes Educators in Australia (4).

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Authors

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Contributors

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Lorena Akerman, Karen Crawford, Olivia King, Anna Lawrence, Kylie Mahoney, Kate Marsh, Lynda Marshall, Rachel McKeown, Celestina Shori, and Donna Wellins.

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 2,400 members working in all sectors and across all 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 multidiscipline 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.



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1 Introduction

The Australian Diabetes Educators Association (ADEA) was formed in 1981 and is the leading Australian organisation for health care professionals providing diabetes education, management and care in Australia. Our members are healthcare professionals who are committed to providing evidence-based best practice diabetes education for all people living with, at risk of, or affected by diabetes, to ensure their optimal health and wellbeing.

ADEA is the regulatory body for the <u>Credentialled Diabetes Educator (CDE®)</u> certification. CDEs are health professionals who have undertaken a <u>rigorous credentialling program</u> and have <u>specialist knowledge</u> in the field of diabetes education.

The CDE certification provides assurance to people with, or at risk of, diabetes – as well as their families, carers and health care providers – that they will receive quality diabetes education and advice.

In addition to the CDE certification program, ADEA is committed to promoting **best practice in diabetes education, management and care** in Australia and internationally, including:

- promoting the goal of optimal health and quality of life and advocating for equitable
 access to quality diabetes education, management and care for all people living with, or
 affected by, diabetes
- developing and disseminating standards of practice and care
- supporting and promoting the implementation of best practice diabetes education and care
- accrediting and endorsing diabetes education courses delivered by universities and other organisations
- promoting and conducting research to guide quality diabetes education and actively disseminating research results
- **liaising and collaborating with relevant bodies** in Australia and other countries to advance the practice of diabetes education and to assist people living with, or at risk of developing diabetes, to achieve and maintain optimal health and quality of life.

Since the initial development of core competencies in the late 1980s, ADEA as an organisation and CDEs as a professional group, have evolved considerably. The process, structure and expected outcomes of diabetes education have been more clearly articulated and the number of professions eligible to apply for CDE status has expanded to include registered nurses and a range of allied health professions that are involved with the care and management of people living with diabetes.

Health professional disciplines eligible to apply for ADEA credentialled status:

- Aboriginal and Torres Strait Islander Health Workers and Practitioners
- Accredited Exercise Physiologist
- Accredited Practising Dietitian
- Registered Midwife
- Registered Medical Practitioner



- Registered Nurse (RN or Division One)
- Registered Optometrist
- Registered Pharmacist
- Registered Physiotherapist
- Registered Podiatrist

Under the guidance of expert members in the Competency Working Group the *National Core Competencies* document has undergone a major review. This review encompassed a progression from 'novice to expert' as outlined by Dreyfus and Dreyfus (5) and Benner (6), and utilised by other health professional organisations (7) (8), and was a more useful and practical model, providing for CDEs that come to their roles with a variety of experiences and skills.

This document outlines the minimum competencies expected of all CDEs regardless of their primary discipline as well as describing more advanced levels of competency expected of CDEs as they grow and develop in their role as diabetes educators.

2 Key Aims

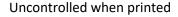
The key aims of this document are to:

- define the minimum competencies required of CDEs
- provide an outcomes-oriented guide for tertiary institutions to assist in preparing graduates for the competencies they will need to demonstrate for credentialling as a CDE in entry level diabetes self-management education courses accredited by ADEA
- provide health practitioners seeking CDE status with a framework for identifying their own professional development and practice needs to meet requirements for recognition as a CDE
- provide CDEs with a framework for continually assessing their own competence and professional development needs
- describe performance standards that consumers and employers can expect from CDEs.

3 What this document does not do

This document **does not** replace the professional standards and guidelines for health professional practice or detail the scope of practice. The document provides guidance on the competencies and capabilities required to work as a CDE.

All CDEs are required to maintain and uphold their professional standards that define practice and behaviour in addition to working within Level 1 competencies as defined by ADEA in this document. All CDEs are required to work within their own scope(s) of practice (please refer to the ADEA document, *Role and Scope of Practice for Credentialled Diabetes Educators in Australia*) and adhere to all relevant legislation related to authority to practice (3).



4 Role and Scope of Practice of a Credentialled Diabetes Educator

The ADEA believes the role of the CDE in providing diabetes education, clinical care, research, policy development, service planning and management is essential to the future health of people with diabetes, people at risk of diabetes and the wider community (4).

CDEs use a range of specialised knowledge and skills to promote optimal health and wellbeing. They integrate diabetes self-management education with clinical care as part of a therapeutic intervention to promote physical, social, spiritual and psychological wellbeing.

CDEs are required to adopt a person-centred care approach when providing diabetes selfmanagement education to those living with diabetes or prediabetes to:

- develop the knowledge, skills and confidence for the everyday management of prediabetes, diabetes and diabetes-related complications
- understand personal health risks
- explore the meaning and implications of these risks in the context of personal,
 socioeconomical and cultural influences and in terms of current lifestyle behaviours
- develop and understand a comprehensive self-management plan that will maximise health outcomes and quality of life (3).

5 Core Competency Domains for Credentialled Diabetes Educators

Diabetes education and management is a specialist area of practice. All CDEs, regardless of their primary discipline, have common minimum competencies they must maintain in order to work as a CDE and they must maintain knowledge and competence to work in their role at a specialist level.

CDEs work in a variety of practice settings across the intervention and care continuum. A CDE's practice is underpinned by a core body of knowledge, skills and activity in the following five domains:

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

CDEs have a professional responsibility 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 people with or at risk of developing diabetes.

To be credentialled and to maintain credentialling status annually, CDEs must demonstrate how they:

- apply knowledge of best practice treatment, management and care of people with prediabetes and diabetes (domain 1)
- apply evidence-based education and self-management skills, interventions and techniques



- to improve outcomes for people with, and at risk of, prediabetes and diabetes (domain 2)
- contribute to, and/or lead, research and quality improvement to build the evidence base to support improvements in self-management of prediabetes and diabetes education and care (domain3)
- apply principles of program and/or business management to contribute to the safe, effective and efficient delivery of diabetes services that support successful selfmanagement of prediabetes and diabetes (domain 4)
- provide expertise and leadership within the health profession and advocate for evidence based best practice diabetes care for all people living with prediabetes and diabetes (domain 5).

6 Competency Domains and Core Skills, Knowledge and Values

Under each of the five domains of competency there is a list of skills, knowledge and values that make up the competency. These are considered the base core skills, knowledge or values (Level 1 competency) of all CDEs, regardless of their scope of practice. All CDEs must endeavour to maintain core competency under each domain of practice.

The following are the base core competencies required for a CDE to meet each of the competency domains.

6.1 Domain 1: Clinical Practice

Competency

Credentialled Diabetes Educators (CDEs) apply knowledge of best practice management and care to support people with prediabetes and diabetes.

CDEs 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 and promote current principles of evidence based practice to the management, care and support of people living with, and at risk of, prediabetes and diabetes
- provide or promote clinical care that is consistent with the regulatory framework governing the CDE's primary discipline and refers people with diabetes to other members of the interdisciplinary team, as appropriate to maximise outcomes
- 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
- understand and can explain available and emerging technologies used for diabetes education, management and support
- describe the interrelationship between nutrition, exercise, stress, sleep and medications



- for diabetes management
- explain how to safely administer diabetes-related medicines to effectively manage prediabetes and diabetes
- explain the relationship between diabetes, other conditions and co-morbidities
- explain the basic components of treatment appropriate for each type of diabetes
- explain the inter- disciplinary nature and support the coordination of care of the management and support of a person living with prediabetes/diabetes
- perform and interpret clinical assessment to monitor clinical indicators of diabetes management and general health
- analyse clinical information to guide decision making and referral to members of the interdisciplinary team
- understand the role and impact of diabetes stigma and distress on people living with diabetes and know when to refer for additional support.

6.2 Domain 2: Education and Counselling

Competency

Credentialled Diabetes Educators (CDEs) apply evidence based education and self-management skills, interventions and techniques to improve outcomes for people with, and at risk of, prediabetes and diabetes.

CDEs work within an interdisciplinary diabetes team to tailor interventions to individualised self-management needs.

Core skills, knowledge and values

- demonstrate effective communication and counselling skills to facilitate informed decision making by the person with, or at risk of, prediabetes and diabetes
- understand and apply evidence based education and techniques to facilitate behaviour change and support of people living with or at risk of developing prediabetes and diabetes
- utilise a person-centred approach that is cognisant of the person with diabetes/their carers' cultural, economic and social background, health literacy, physical and cognitive abilities, and life stage when educating and supporting the person living with prediabetes/diabetes or at risk of developing diabetes
- apply and promote systematic and comprehensive person-centred care that is delivered in a culturally sensitive and safe manner across the lifespan
- customise programmes, behaviour change techniques and interventions at all times considering the age, health literacy, cultural or ethnic background, and physical, or cognitive abilities of the person living with, or at risk of developing, prediabetes/ diabetes
- apply cultural competency and safety principles to maximise therapeutic relationships with all individuals in their care who are from different cultural backgrounds than their

own

 maintain a non-judgemental approach when working with people living with, or at risk of, prediabetes/diabetes.

6.3 Domain 3: Research, Quality Improvement and Professional Development

Competency

Credentialled Diabetes Educators (CDEs) contribute to and/or lead research and quality improvement to build the evidence base to support improvements in diabetes care and education.

CDEs are committed to ongoing professional development.

Core skills, knowledge and values

CDEs:

- are committed to ongoing quality management to improving the quality of life and outcomes of people living with, and at risk of, prediabetes/diabetes
- contribute to/lead the ongoing monitoring and evaluation of education and care provided at the individual, program and, where possible, population level
- apply quality improvement principles when undertaking or contributing to quality improvement activities
- explain how research is used to develop evidence-based guidelines and resources
- articulate basic skills in research methodology
- critically appraise research findings
- keep up to date with current research in diabetes education, management and care and apply to everyday practice
- use best available evidence from peer reviewed literature to inform clinical practice
- critically appraise and reflect on individual knowledge, skills and work practices and develop a professional development plan to address deficiencies in these areas.

6.4 Domain 4: Management and Administration

Competency

Credentialled Diabetes Educators (CDEs) apply principles of program and/or business management to contribute to the safe, effective and efficient delivery of diabetes services.

Core skills, knowledge and values

- demonstrate organisation and communication skills that effectively and efficiently provide diabetes education, management and care within the interdisciplinary team
- explain the organisational and community structures in place to effectively navigate

- diabetes services
- explain the importance of maintaining accurate records and demonstrate the ability to clearly and precisely document interaction with clients and 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
- contribute to the development of policies and procedures that support efficient diabetes service delivery
- protect the confidentiality of clients and adhere to the Australian Privacy Principles.

6.5 Domain 5: Leadership and Advocacy

Competency

Credentialled Diabetes Educators (CDEs) provide expertise and leadership within the health profession and advocate for best practice diabetes care.

Core skills, knowledge and values

- have the knowledge, skills and competence to deliver best practice diabetes education and
- show leadership in the speciality field of diabetes education, management and care
- have the knowledge, skills and confidence to advocate for people with, and at risk of, prediabetes and diabetes to improve their health outcomes
- seek opportunities to build 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
- actively engage in mentoring relationships, both formal and informal
- practice in accordance with the ADEA Code of Conduct and work within their own scope of practice
- contribute professionally to diabetes education, management and care.

7 Level of Competency Cues and Examples

Three levels of competency are described for each domain:

• Level 1: CDEs with the core basic skills and experience in the area of diabetes education and management.

Note: A CDE who is functioning at the base competency level should continue to seek support and mentoring of more experienced CDEs to develop a range of skills within the competency.

- Level 2: Experienced CDEs in the area of diabetes education and management. CDEs at this level have attained the competency indicators in Level 1 and are beginning to function at a higher autonomous level. They are more confident and proficient in one or more domains and they have the skills and knowledge in a particular domain to take on a leadership role and to mentor less experienced practitioners. They may also be taking more active involvement in, or starting to lead, research and/or quality improvement activities in diabetes education and care within or external to the organisation in which they are working.
- Level 3: Recognised leaders in the area of diabetes education and management. These CDEs have taken active roles in initiating and leading research, directing policy development, analysing and reporting on outcome measures at the individual, unit, organisation and population level.

The levels of competency are a guide to assist the CDE in determining their proficiency in all competency domains. It is not expected that all CDEs progress in a linear fashion from Level 1 to Level 3 or to be equally proficient in all domains. Some CDEs may choose to build expertise in the clinical or educational area where others may build expertise in management or research. It is the expectation that all CDEs regardless of their primary discipline or scope of practice maintain a minimum level of competency (Level 1) in all domains.

Under each level are cues or examples of the behaviours, skills or activities a CDE at each level would be expected to display regardless of the specialty area the CDE may be working in.

This document should be used as a tool for CDEs to guide their career as a diabetes educator and to ensure that on-going professional education and development is directed at not only maintaining the base level competencies but working towards becoming more proficient in other areas of CDE practice.

CDEs should reflect on each domain and the three levels of competency that are outlined in this document when setting goals and determining continuous professional development (CPD) requirements.

It may be useful for CDEs to self-rate their competence against the core base level from a scale of 1- 10 to assist to identify the areas of competence they may like to develop, and plan further education or training as they continually work to further their skills.

For those working towards initial credentialling as a CDE, this exercise may be undertaken in collaboration with their mentor.

8 Domain 1: Clinical Practice

Competency

Credentialled Diabetes Educators (CDEs) apply knowledge of best practice management and care to support people with prediabetes and diabetes.

CDEs 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.

Cues and examples to demonstrate each level of competency			
Level 1	Level 2	Level 3	
	1	1 - 1	
tramework within which they practice provides accurate information on prediabetes and all types of diabetes to clients, other health professionals and members of the community provides accurate information about all aspects of diabetes care including nutrition, exercise, glucose monitoring, sick day management, driving,	 accepts delegation/referrals of clinical care according to their level of competency assists with the development of evidence based decision making frameworks proactively assesses adherence to best practice guidelines within the clinical setting and takes 	outcome measures demonstrates leadership in monitoring clinical care to ensure that care is consistent with applicable legal frameworks participates in broader community /organisational committees or working parties to develop and review best practice	

- complication management
- demonstrates knowledge
 of devices and
 technologies available,
 including glucose monitors,
 injection devices, insulin
 pumps and continuous
 glucose monitors
- conducts holistic clinical assessment to identify the goals and self-management support needs of people with diabetes (and carers as appropriate)
- communicates progress
 with other health
 professionals and identifies
 the need to refer for
 clinical care outside their
 expertise and selects
 appropriate services
- actively collaborates with the person with diabetes and their carer or support worker as appropriate, the referring practitioner and other members of the diabetes care team to establish agreed clinical targets
- discusses the role and importance of annual cycle of care with clients to reduce the risk of diabetesrelated complications
- aware of the mental health impact on the person living with diabetes

- remedial action to address issues identified
- uses validated tools to assess the mental health of clients and provides appropriate referrals
- clinical guidelines
- influences national policy regarding the clinical management of people with diabetes and takes a lead in advocating
- developing resources and knowledge building activities for those who are on Level 1 and 2 of their clinical practice competency level
- participates in curriculum and program development, design and evaluation
- develops and implements policies to screen for and address mental health screening issues for people with diabetes

9 Domain 2: Education and Counselling

Competency

Credentialled Diabetes Educators (CDEs) apply evidence-based education and self-management skills, interventions and techniques to improve outcomes for people with, and at risk of, prediabetes and diabetes.

CDEs work within an interdisciplinary diabetes team to tailor interventions to individualised self-management needs.

Cues and examples to demonstrate each level of competency Level 1 Level 2 Level 3 applies health behaviour applies a wide variety of moves seamlessly and educational theory to approaches to the between behavioural inform, motivate and education and approaches to meet support a person living counselling of people evolving needs of the with diabetes throughout with diabetes and is client their lifespan willing to change an apply knowledge of ageassists the client to approach as required specific learning establish realistic, acts as a resource for principles, health literacy meaningful selfless experienced and behaviour change management goals and educators and other theory to develop health professionals to effective diabetes success metrics facilitate an evidencededucation and support applies exploratory questioning, reflective based individualised programs listening, and education plan that is develops, designs and focused on behavioural motivational interviewing evaluates curriculum and techniques to enhance change health programs communication and actively participates in teaches behavioural understanding the development and theories and approaches implementation of assesses the client's to colleagues and other understanding of educational materials, health professionals relevant clinical and selfsupportive networks supports the ongoing and models of diabetes management options professional available to them care development of diabetes develops and delivers seeks guidance from educators and other diabetes training more experienced CDEs health professionals when alternative programs for generalist participates in approaches may be health care providers at professionalorganisation required to support or a variety of levels workgroups/committees educate the client acts as a resource and to promote and advocate consults and provides provides ongoing to improve diabetes care education whereby the professional and education development in the person with diabetes is seeks and participates in educator's own area of the central person in the advanced level clinical expertise for day-to-day management educational opportunities of their condition and other members of the

supports clients to take	inter-disciplinary care	in diabetes education and
an active part in their	team	management
management		
 collaborates with the 		
client to identify actual,		
perceived and potential		
barriers to self-		
management and		
behaviour change		
is non-judgemental and		
respects the choices		
made by the person with		
diabetes		
maintains currency with		
digital health		
information, and mobile		
technology that		
promotes and enhances		
diabetes self-		
management		
seeks to understand the		
role and impact of culture		
and ethnicity on diabetes		
care and management		
when providing		
individualised care and		
support to people living		
with diabetes		

10 Domain 3: Research, Quality Improvement and Professional Development

Competency:

Credentialled Diabetes Educators (CDEs) contribute to and/or lead research and quality improvement to build the evidence base to support improvements in diabetes care and education.

CDEs are committed to ongoing professional development.

Cues and examples to demonstrate each level of competency			
Level 1	Level 2	Level 3	
 actively participates in ongoing quality improvement and research activities contributes to the ongoing monitoring and evaluation of the education and clinical care provided at the individual and program level actively undertakes self-reflection and seeks critical appraisal of own performance from other CDEs and peers regularly critically appraises peer reviewed and relevant non-peer reviewed literature to inform and guide diabetes education and clinical management develops and implements an annual professional development plan based on self-identified competency development needs 	 takes a lead in ongoing quality improvement by evaluating and contributing to the monitoring and evaluation of the education and clinical care provided at the individual and program level as well as contributing at a population level participates in ongoing quality improvement by contributing to, monitoring and evaluation of education and clinical care provided at an individual and program level takes opportunities to actively participate in and undertake research to build the evidence base in diabetes management and care actively utilises current best practice evidence in the development, and revision of clinical resources, guidelines policies or procedures benchmarks services and service outcomes against appropriate indicators and other services to achieve best 	 acts as a leader and resource to other health professionals in research methodology, analysis and implementation seeks opportunities to actively undertake research to build the evidence base in diabetes management and care undertakes higher degree qualifications in the field of diabetes education (eg Masters/PhD) actively disseminates research findings by presenting at conferences and workshops monitors and ensures research evidence is implemented into practice evaluates client experiences and outcomes within the diabetes service influences national policy regarding the need for evidence- based research mentors and provides opportunities for those on Level 1 and 2 to participate and gain skills in research and quality improvement proactively initiates practice innovations and service redesign solutions 	

practice • seeks opportunities to disseminate research findings and evidence based practice	to provide a more efficient, effective service • applies current best practice and evidence based research findings to the development and review of resources, policies and procedures
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11 Domain 4: Management and Administration

Competency:

Credentialled Diabetes Educators (CDEs) apply principles of program and/or business management to contribute to the safe, effective and efficient delivery of diabetes services that support successful self-management of prediabetes and diabetes.

Cues and examples to demonstrate each level of competency			
Level 1	Level 2	Level 3	
 complies with professional, ethical and legal regulations, policies and guidelines for diabetes educators effectively and efficiently manages a client case load effectively and efficiently utilises resources to deliver diabetes services accurately documents and reports interactions with people living with diabetes maintains knowledge and current database of other health professionals and services available to refer to refers to other health professionals and community services to optimise outcomes for people living with diabetes ensures client information is made available to relevant health care providers in a timely manner and within the prescribed bounds of confidentiality maintains clinical records in accordance with national privacy laws conducts education in a suitable environment and ensures client safety and confidentiality 	 manages the workload of the unit, allocating human resources in an efficient and effective way assists with the development of an annual business plan participates in the development and review of service policies and procedures participates in and contributes to workplace or organisational committees or working parties that support diabetes related service issues assists with the planning and coordination of diabetes camps and other specialised services, where appropriate analyses evaluation data to support the review and planning of diabetes related services 	 takes a lead role in the development of an annual business plan takes an overall lead in the management of human and material resources to deliver efficient, effective services takes the lead in developing links and referral pathways with community and other health agencies applies a population based approach to service planning including systematic assessment of community needs collaborates with stakeholders to identify and document overall diabetes service goals, targets and strategies reports to relevant authorities on the utilisation of the services reviews information to identify barriers to health service access and equity of service provision 	

12 Domain 5: Leadership and Advocacy

Competency:

Credentialled Diabetes Educators (CDEs) provide expertise and leadership within the health profession and advocate for best practice diabetes care.

Cues and examples to demonstrate each level of competency			
Level 1	Level 2	Level 3	
 acts as a consultant and resource on diabetes education and management for others within the organisation actively shares the latest research, guidelines and procedures with other members of the health workforce recognises unsafe and unprofessional practice in self and/or others and responds appropriately according to professional codes of practice and organisational requirements advocates for diabetes prevention, education and care and helps to build the capacity of the health workforce in this area identifies high risk groups and groups with special needs including CALD groups and actively advocates to adapt the service to accommodate their needs demonstrates awareness of diabetes stigma 	 promotes a culture of collegiality that enables members of the multidisciplinary team to feel respected and valued participates in and contributes to the work of relevant committees creates and utilises opportunities to enhance public awareness advocates for diabetes prevention, education and care contributes to the development of programs to address CALD needs mentors members of the diabetes care team recognises the impact and promotes awareness of diabetes stigma in the workplace and the community 	 works towards improving population-based interventions takes the lead on liaising with local and national public health networks and diabetes teams in the development of integrated diabetes care pathways actively seeks opportunities to represent diabetes educators and diabetes education on national and international committees, working groups and in review of government policy proactively advocates for resources to meet the needs of people living with diabetes and their family/carers influences national policy regarding the promotion and improvement of services for people living with diabetes works in collaboration with higher educational institutions and other providers to meet educational needs of health care professionals develops policies and procedures to address diabetes stigma in the workplace identify existing and develop culturally appropriate programs to 	

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ensure equitable access to
structured self
management education
 advocates for the
recognition and
expansion of the diabetes
educator role

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