

ANMF (Vic Branch) Diabetes Nurse Educators Special Interest Group

CHAIR PERSON REPORT 2016

The ANMF DNE SIG has now been in existence since 2012. The committee has been composed of a small group of dedicated members and membership has waxed and waned over these four years. With diabetes on the increase and funding for health care always under pressure, this group aims to provide support for those nurses involved in diabetes education.

As the Federal Election is just around the corner, members may be considering which party will provide the best support for health care. Similarly, we must ask ourselves, how do we supply the best health care team to our patients and clients?

The world of diabetes is filled with various acronyms labelling the groups involved in diabetes management. For nurses, we have the ANMF, the APNA, the Nurse Board, APHRA, the ADEA, ADS, IDF, ADIPS, along with CDM Programs and TCA referrals. For clients, they have their GPs, all of the allied Health Professionals, DNEs, DA, the NDSS, Centre Link and the PHI industry. In all of this, where does the nurse stand? Whether a Practice Nurse, Staff Nurse Community Nurse or a Specialist Nurse, we are yet to be recognised as an allied health professional in cyber space. Clients still cannot obtain reimbursement directly for our services through Private Health Insurance Companies.

In these confusing days of greater involvement with cyber communities and constant barrage of noise from the persistent computer programs, phone calls, texts and endless emails, it is up to us to stand quietly with our clients within the noise and din and keep them focused on their health goals. But whilst we do this we need to remember to support our own voice in all that noise. This committee has for the last four years discussed various research projects we could undertake, to show our worth and ensure clients can always use our services. Sadly, we are yet to finalise one project.

We have CDE RNs teaching CSII, CGMS, CHO/insulin dose advising BG monitors, Insulin Pens and devices and Apps and technological trackers. Sadly, we have not been clever enough to track how effective our education process is, and funding for our services are yet again under review. Interestingly, with most of us working towards obtaining the qualification of CDE, the ANMF does not support this credentialling process for nurses. It was in writing a document for the ANJ, outlining the role of the CDE RN, that our group was told to delete the word “credentialled” from the article. The ANMF has the view that, once the post-graduate course has been completed, the nurse is thereby

qualified for the role. In fact, the ANMF has stated that the credentialling process can be about providing funding for the body which overviews the credentialling process.

We have seen the DAA post guidelines for the role of the CDE Dietitian. We have heard the ADEA promote the role of the Pharmacist in diabetes education. We have watched the rise and rise of Podiatry Private Practice with the launch of the Team Care Arrangements. New groups are developing, such as the Primary Care Diabetes Society, which may allow for our voice to be heard. But nurses need to ensure that we speak up and that we work towards identifying the benefits of our existence in the health care team - for the sake of our clients. As nurses, this Special Interest Group needs to be demonstrating our role in in diabetes education. We need more members so we can organise and develop the projects that will prove our worth. We need to be promoting our role in diabetes self-management education, at the upper level of the Australian health network. This all takes time and planning and we all know how much time each of us does not have!

So, moving forward, the DNE SIG is working with the ANMF to review the role of credentialling for diabetes nurse educators. We are gathering documentation to allow for high level discussion of our role in the education process. We will be working with the ANMF around recognition of nurses by the Private Health Industry. We are considering ways of promoting our existence on the social media and we are talking to the ADEA about our need for recognition within the generic role of the CDE Health Professional.

The strength of a group is not just about having the numbers at a meeting; it is about being able to state that we represent a bigger voice. We have lowered the cost of being involved in the SIG group in order to encourage a greater membership. We encourage all current members to enlist other members in this SIG group, in order to allow our voice to be considered. We thank you for being here today and for being members of this group. The committee will continue to work towards proving the worth of the diabetes nurse educator, with the sole aim of benefitting those people with diabetes.

Catherine Wallace-Wilkinson

Chair

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