

# **Diabetes Education for Health Care Professionals**

## **PLAR Candidate Guide**

Prior Learning Assessment and  
Recognition (PLAR)



Tomorrow  
in the making.

## Copyright

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Saskatchewan Polytechnic

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The Diabetes Education for Health Care Professionals program is dedicated to removing barriers and broadening the access to programs at Saskatchewan Polytechnic. We believe that adults acquire knowledge and skills through life and work experience that may align with courses within our programs.

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<b>Revised</b>	December 2006	January 2008	July 2008	May 2011
	April 2015			
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## **Why consider a PLAR assessment?**

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PLAR refers to the combination of flexible ways of evaluating people's lifelong learning, both formal and informal against a set of established standards. You can receive academic credit for your relevant lifelong learning. The Diabetes Education for Health Care Professionals program recognizes prior learning in a number of ways.

We recognize:

- Previous formal learning from an accredited training institution through transfer of credit.
- Previous informal learning or experiential learning through a comprehensive prior learning and recognition process.

## **What are the PLAR options?**

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To be eligible for PLAR, an applicant must first register or already be registered as a Saskatchewan Polytechnic student.

### **Option A: Individual course challenge**

If you have are registered with your professional association, have 2 years experience or the equivalent of 3000 hours recent diabetes educator experience, have an employer reference and have learned the skills and knowledge for **one or more** of the Diabetes Education for Health Care Professionals program courses, you may apply to be assessed for each applicable course.

### **Fees:**

- There will be a charge for each individual course assessment.
- For a listing of the specific PLAR fees, check the [PLAR database](#) or call Saskatchewan Polytechnic and ask to speak to the PLAR advisor/counsellor assigned to the Diabetes Education Health Care Professionals program at: 1-866-467-4278.

## **How many courses can be challenged through PLAR in the Diabetes Education for Health Care Professionals program?**

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Currently we have nine theory courses, one lab component and a clinical component with PLAR challenges available. There is no limit. You may challenge as many of these courses as you are able to prove prior skills and knowledge through assessment.

## Which courses are PLAR-ready?

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Diabetes Education for Health Care Professionals program profile			
COURSE CODE	COURSE NAME	PLAR challenge(s) <i>available</i> through program	PLAR challenge(s) <i>not available</i>
HLTH 266	Diabetes Management: A Review	✓	
HLTH 267	Primary Prevention	✓	
EDUC 260	The Education Process	✓	
CLTR 260	Cultural Considerations	✓	
HLTH 268	Insulin and Oral Agents	✓	
HLTH 269	Nutrition Management	✓	
HLTH 270	Activity Management	✓	
HLTH 271	Complications: Acute and Chronic	✓	
HLTH 272	Diabetes Care Across the Lifespan	✓	
HLTH 273	Lab Component	✓	
CLIN 231	Clinical Component	✓	

For assistance call Saskatchewan Polytechnic and ask to speak to the PLAR advisor/[counsellor](#) assigned to the Diabetes Education for Health Care Professionals at: 1-866-467-4278.

## Is PLAR available at any time of the year?

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You can register for PLAR between September 1<sup>st</sup> and June 1<sup>st</sup>. You must have completed the requirements for PLAR for a specific course prior to the first week of June so that the assessment can be completed by the end of June. **The deadline for applying for PLAR is June 1st.**

## Is it *easier* to challenge a course through PLAR or take the course?

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Neither is easier. By using PLAR you may reduce the repetition of studying information that you already know. The PLAR process allows you to demonstrate knowledge you already have.

PLAR is not an easy way to certification, rather a “different” way to obtain certification. Your personal level of skill and experience will dictate which courses you choose to challenge. The self-audit section found later in this guide will help you decide if you have a good match of skill and knowledge for a specific course.

## **Methods of assessing prior learning**

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Assessment methods measure an individual's learning against course learning outcomes. The assessment methods listed below are the ones most commonly used, but other forms of flexible assessment may be considered. These assessments may include one or a combination of the following assessment tools:

- product validation & assessment
- challenge exam
- standardized tests
- performance evaluations (including skill demonstrations, role plays, clinical applications, case studies)
- performance videotapes and/or audiotapes
- interviews and oral exams
- equivalency (evaluations of learning from non-credit training providers)
- evidence or personal documentation files (providing evidence of learning from life and work experiences and accomplishments)

## **If I live out of town, do I have to travel to a main campus to do PLAR?**

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There may be times that you will need to meet with the program faculty on campus. However, we will try to keep travel to a minimum.

## **What if I have a disability & need equity accommodations?**

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At Saskatchewan Polytechnic, we understand that sometimes services must be provided to students in a variety of ways to achieve the goals of fair representation. Therefore, the range of services provided for Education Equity students is as diverse as the needs of those students. We strive for equity (not uniformity) and provide varied services for students with differing needs. If more information is required, please contact a Saskatchewan Polytechnic counsellor at a campus closest to you or refer to the Saskatchewan Polytechnic Web site:  
<http://saskpolytech.ca/student-services/support/counselling-services.aspx>

## **Are there other methods to gain Saskatchewan Polytechnic course credits for prior learning?**

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### **Transfer Credit**

Yes, Saskatchewan Polytechnic will grant credit for previous training that is similar in content, objectives, and evaluation standards to Saskatchewan Polytechnic training. Transfer of credit is different from the PLAR process. Transfer Credit guidelines may be found at:  
<http://saskpolytech.ca/admissions/resources/transfer-credit.aspx>

It is the student's responsibility to check with [Registration Services](#) for specific campus procedures on this policy. For specific information and guidelines regarding transfer of credit, contact a [Saskatchewan Polytechnic educational counsellor](#).



## Equivalency Credit

Equivalency credit refers to the application of credit you may have earned in a previously taken Saskatchewan Polytechnic course to your current Saskatchewan Polytechnic course. Apply at registration services for *equivalency credit*. This process should also be completed prior to your PLAR challenge. If these credits cannot be used for *equivalency credit*, you may use these accredited courses as part of your evidence for your PLAR challenge.

## Contact us

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If more general Saskatchewan Polytechnic information of program offerings is required, please contact a designated PLAR counsellor at a campus closest to you.

If specific information is required for a PLAR Challenge within the Diabetes Education for Professionals Program, please contact the Program at 306-775-7573.

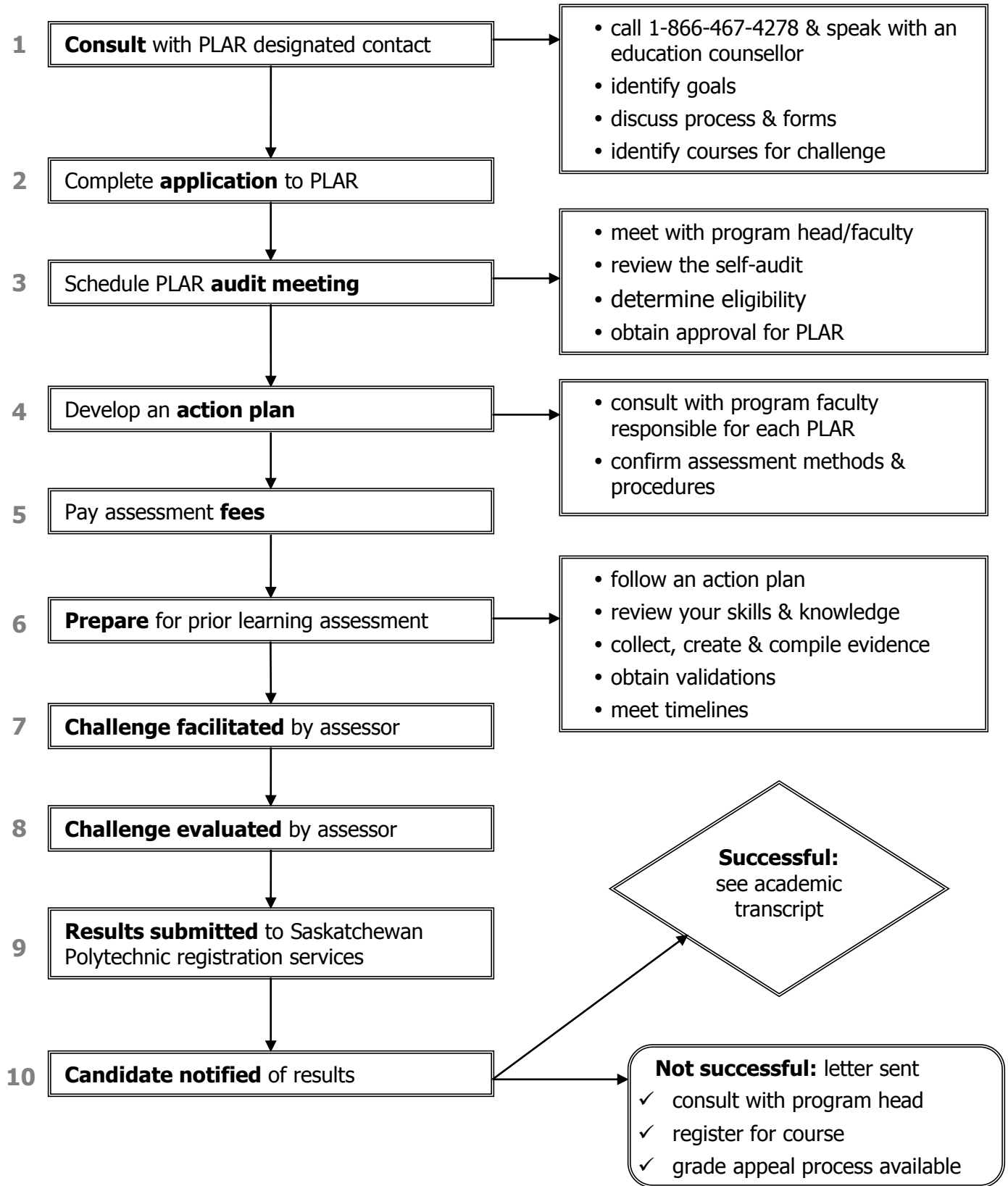
Saskatchewan Polytechnic in Moose Jaw  
Counselling Services, Room 2.203  
306-691-8311 or 306-691-8310  
[palliscounselling@saskpolytech.ca](mailto:palliscounselling@saskpolytech.ca)

Saskatchewan Polytechnic in Prince Albert  
Counselling Services, Room F203 (Technical Centre)  
306-765-1611  
[woodlandcounselling@saskpolytech.ca](mailto:woodlandcounselling@saskpolytech.ca)

Saskatchewan Polytechnic in Regina  
Counselling Services, Room 228  
306-775-7436  
[wascanacounselling@saskpolytech.ca](mailto:wascanacounselling@saskpolytech.ca)

Saskatchewan Polytechnic in Saskatoon  
Counselling Services, Room 114  
306-659-4050  
[kelseycounselling@saskpolytech.ca](mailto:kelseycounselling@saskpolytech.ca)

## Prior Learning Assessment and Recognition process



## **Guiding principles for developing a PLAR evidence file**

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1. As you begin the PLAR process you will be advised if any evidence is required. This will be identified in your [action plan](#). Check with the PLAR designated contact **before** you begin to gather evidence.
2. Evidence must be valid and relevant. Your evidence must match the learning outcomes identified for each course.
  - It is your responsibility to create, collect and compile relevant evidence – if required.
3. Learning must be current: registered with your professional association, have 3 years experience or the equivalent of 5000 hours recent diabetes educator experience, and have an employer reference.
4. The evidence should demonstrate the skills and knowledge from your experiences.
5. The learning must have both a theoretical and practical component.

## **Types of evidence**

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There are three types of evidence used to support your PLAR request:

1. Direct evidence – what you can demonstrate for yourself.
2. Indirect evidence – what others say or observe about you.
3. Self-evidence – what you say about your knowledge and experience.

Ensure that you provide full evidence to your Diabetes Education for Health Care Professionals faculty assessor so that your prior learning application is assessed appropriately. Well organized, easy to track evidence will also ensure that none of the evidence is missed or assessed incorrectly.

Here are some examples of evidence that you may be requested to submit as part of your evidence file (if required):

- Letter(s) of validation from employer or direct supervisor.
- Course outlines and content descriptions from non-credited training sessions.
- Copies of transcripts recording your academic education.
- Performance appraisals
- Resume
- Training records
- Certifications
- Detailed course outlines and content descriptions from industry-based non-credit courses, training institutions or workshops.
- A report highlighting skills and accomplishments that demonstrates how you have accomplished the stated learning outcomes.
- Special awards
- Work samples, i.e. word processing documents

All documents that are submitted to Saskatchewan Polytechnic may be returned to the student after the final results have been given and the grade appeal deadline of seven days has passed. A copy of transcripts and certificates may be included in your evidence file, but be prepared to show original documents at the PLAR audit meeting for validation.

### **How long will it take to prepare evidence for PLAR?**

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Since the requirements are different for each course, and each candidate has different experiences, the amount of time it takes to prepare your evidence will vary.

### **Frequently asked questions**

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#### *Can I PLAR the lab component and the Clinical Preceptorship?*

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HLTH 273 Lab Component and CLIN 231 Clinical Component are available for PLAR. CLIN 231 is available for PLAR but only if you are currently a diabetes educator.

#### *How long do I have to complete the required assessments, e.g. assignments and exams?*

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You must submit the required assignments and write the challenge exam within 5 weeks or within the time period discussed in consultation with your program faculty advisor from the time you register to PLAR a course.

#### *What if I want to review some of the materials related to the course before I take the PLAR challenge?*

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All the texts and course manuals are available for purchase through the Saskatchewan Polytechnic Regina Campus bookstore. You can borrow textbooks through the library once you have registered to PLAR a specific course. A current booklist can be found after the exam blueprint section of this manual.

#### *What happens if I am not successful at a PLAR challenge? Can I repeat the challenge?*

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If you do not receive credit through the PLAR process you are required to take the course.

#### *What do I do once I have completed all of the PLAR challenges?*

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You must successfully complete all of the theory courses and the lab component, either through PLAR or the regular process, you can register for CLIN 231, Clinical Component.

## Steps to complete a self-audit

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1. Read through the levels of competence as listed below.

<b>Mastery:</b>	I am able to demonstrate the learning outcome well enough to teach it to someone else.
<b>Competent:</b>	I can work independently to apply the learning outcome.
<b>Functional:</b>	I need some assistance in using the outcome.
<b>Learning:</b>	I am developing skills and knowledge for this area.
<b>None:</b>	I have no experience with the outcome.

### Learning outcomes

For each learning outcome listed, please self-evaluate your competency levels and record in the appropriate column for each self-audit.

2. Take a few minutes and read through the following self-audit for each course you are interested in as a PLAR candidate.
3. Check your level of competence as you read through each of the learning outcomes for each course. The information will help you in your decision to continue with your PLAR application.
4. In order to be successful in a PLAR assessment, your abilities must be at the competent or mastery level for the majority of the learning outcomes. Some things to consider when determining your level of competence are:
  - How do I currently use this outcome?
  - What previous training have I had in this outcome: workshops, courses, on-the-job?
  - What personal development or volunteer experience do I have in this area?

Be prepared to explain the reason you chose this level if asked by an assessor.

5. Bring the completed self-audit to a consultation meeting with the program head or faculty member in [step 3 – PLAR process](#) of the candidate process for prior learning assessment.

## Self-audit guide(s)

### HLTH 266 – Diabetes Management: A Review

Your studies will focus on a review of the basic features of diabetes and diabetes management. You will discuss topics related to pathophysiology (including population health concepts, epidemiology and demographics of diabetes, risk factors for diabetes and key client management strategies).

**Credit unit(s):** 3.0

<b>HLTH 266 – Diabetes Management: A Review</b> <b>Mastery:</b> I am able to demonstrate it well enough to teach it to someone else. <b>Competent:</b> I can work independently to apply the outcome. <b>Functional:</b> I need some assistance in using the outcome. <b>Learning:</b> I am developing skills and knowledge for this area. <b>None:</b> I have no experience with the outcome.	<b>Mastery</b>	<b>Competent</b>	<b>Functional</b>	<b>Learning</b>	<b>None</b>
1. Review normal physiology.					
▪ Describe euglycemia					
▪ Describe the role of the pancreas in normal glucose homeostasis					
▪ Identify the body's main sources of fuel					
2. Review pathophysiology of Type 1 and Type 2 Diabetes.					
▪ Review the pathophysiology of diabetes					
▪ Describe the different types of diabetes					
▪ Describe insulin resistance					
3. Outline risk factors for developing diabetes.					
▪ Identify the risk factors for developing Type 2 diabetes					
▪ Outline the risk factors for developing Type 2 diabetes					
4. Describe epidemiology and demographics of diabetes.					
▪ Define the terms epidemiology and demography					
▪ Describe the epidemiology and demographics of Type 1 and Type 2 diabetes					
5. Outline diagnostic criteria.					
▪ Identify classifications for diagnosing prediabetes and diabetes					
▪ Outline diagnostic criteria					
6. Recognize screening procedures and high-risk target groups					
▪ Describe screening procedures					

<b>HLTH 266 – Diabetes Management: A Review</b>		<b>Mastery</b>	<b>Competent</b>	<b>Functional</b>	<b>Learning</b>	<b>None</b>
<b>Mastery:</b>	I am able to demonstrate it well enough to teach it to someone else.					
<b>Competent:</b>	I can work independently to apply the outcome.					
<b>Functional:</b>	I need some assistance in using the outcome.					
<b>Learning:</b>	I am developing skills and knowledge for this area.					
<b>None:</b>	I have no experience with the outcome.					
	<ul style="list-style-type: none"> <li>Describe the most appropriate screening procedure in primary prevention of diabetes</li> </ul>					
	<ul style="list-style-type: none"> <li>Identify high-risk target groups</li> </ul>					
<b>7.</b>	Recognize most recent Clinical Practice Guideline (CPG) recommendations.					
	<ul style="list-style-type: none"> <li>Define Clinical Practice Guidelines</li> </ul>					
	<ul style="list-style-type: none"> <li>Describe the role of CPG in diabetes care</li> </ul>					
	<ul style="list-style-type: none"> <li>Describe how evidence is used to support CPG recommendations</li> </ul>					
<b>8.</b>	Review basic elements of diabetes management.					
	<ul style="list-style-type: none"> <li>Identify the tools of diabetes management</li> </ul>					
	<ul style="list-style-type: none"> <li>Describe the goals of management</li> </ul>					
	<ul style="list-style-type: none"> <li>Discuss the culture of safety and its role in diabetes management</li> </ul>					
<b>9.</b>	Recognize diabetes management involves a partnership between client(s) and health care providers.					
	<ul style="list-style-type: none"> <li>Describe the diabetes health care team</li> </ul>					
	<ul style="list-style-type: none"> <li>Describe partnership and the partnership process</li> </ul>					
	<ul style="list-style-type: none"> <li>Identify the client’s role on the diabetes health care team</li> </ul>					
<b>10.</b>	Recognize common myths about diabetes.					
	<ul style="list-style-type: none"> <li>Identify common diabetes myths</li> </ul>					

### PLAR assessment methods

If you qualify for PLAR, you may be asked to demonstrate your learning in one or more of the following ways. Be prepared to discuss the expectations during a consultation meeting.

#### 1. Evidence file containing the following:

- Evidence showing understanding of most recent clinical practice guidelines.
- A report highlighting skills and accomplishments that demonstrates how you have accomplished the stated learning outcomes. For example:
  - Written explanation of application of clinical practice guidelines in your current practice.
  - Written summary of experience in diabetes care.

- Written discussion of how diabetes management involves a partnership between the client and yourself as a health care professional.
- Certificate from a credited program, course or industry workshop/training with outcomes that encompass the learning outcomes of this course.
- Letter(s) of validation from employer or direct supervisor.
- Course outlines and content descriptions from non-credited training sessions.
- Copies of transcripts recording your academic education.

## **2. Assignment**

- Case study written assignment; related to diabetes risk factors.
- See [Appendix C for assignment directions and rubric](#).

**And**

## **3. Challenge exam**

Online multiple choice. Refer to [Appendix A for exam blueprints](#).

## **Resources**

Canadian Diabetes Association resources – see [www.diabetes.ca](http://www.diabetes.ca) to access relevant fact sheets and professional resources.

Most recent CDA Clinical practice guidelines for the prevention and management of diabetes in Canada – see [www.diabetes.ca](http://www.diabetes.ca) to access and download an electronic copy.

Refer to [Appendix B](#) for program booklist.



## HLTH 267 – Primary Prevention

Primary prevention is a prescription for change. Your studies will focus on a population health approach to diabetes prevention by considering the determinants of health and the effectiveness of interventions. Using community development principles, you will explore strategies to promote the importance of diabetes prevention. You will be introduced to evidence-based practice and its role in health promotion and the primary prevention of diabetes. You will also explore prevention strategies aimed at facilitating behaviour change in people at high risk for developing diabetes.

**Credit unit(s):** 3.0

**Prerequisite(s):** HLTH 266 minimum grade of 60

<b>HLTH 267 – Primary Prevention</b> <b>Mastery:</b> I am able to demonstrate it well enough to teach it to someone else. <b>Competent:</b> I can work independently to apply the outcome. <b>Functional:</b> I need some assistance in using the outcome. <b>Learning:</b> I am developing skills and knowledge for this area. <b>None:</b> I have no experience with the outcome.	Mastery	Competent	Functional	Learning	None
1. Define primary prevention.					
<ul style="list-style-type: none"> <li>▪ Define primary and secondary prevention</li> </ul>					
<ul style="list-style-type: none"> <li>▪ Describe the link between the determinants of health and the primary prevention of diabetes</li> </ul>					
2. Use evidence-based decision making to support Diabetes prevention strategies.					
<ul style="list-style-type: none"> <li>▪ Describe evidence-based decision making</li> </ul>					
<ul style="list-style-type: none"> <li>▪ Describe the role of evidence-based practice in Diabetes prevention</li> </ul>					
<ul style="list-style-type: none"> <li>▪ Use evidence to support primary prevention strategies for reducing risks of Type 2 Diabetes</li> </ul>					
3. Teach lifestyle modifications to reduce risk factors for Diabetes.					
<ul style="list-style-type: none"> <li>▪ Describe the modifiable risk factors for Type 2 Diabetes</li> </ul>					
<ul style="list-style-type: none"> <li>▪ Use basic health promotion guidelines to teach about healthy living strategies</li> </ul>					
<ul style="list-style-type: none"> <li>▪ Use population health promotion strategies aimed at the primary prevention of Diabetes</li> </ul>					
4. Use community development principles in health promotion.					
<ul style="list-style-type: none"> <li>▪ Describe the community development process</li> </ul>					
<ul style="list-style-type: none"> <li>▪ Use community development principles in Diabetes Prevention</li> </ul>					
5. Examine the implications of poverty.					
<ul style="list-style-type: none"> <li>▪ Define poverty</li> </ul>					
<ul style="list-style-type: none"> <li>▪ Describe how poverty affects health</li> </ul>					
<ul style="list-style-type: none"> <li>▪ Examine the link between poverty and Type 2 Diabetes</li> </ul>					

<b>HLTH 267 – Primary Prevention</b> <b>Mastery:</b> I am able to demonstrate it well enough to teach it to someone else. <b>Competent:</b> I can work independently to apply the outcome. <b>Functional:</b> I need some assistance in using the outcome. <b>Learning:</b> I am developing skills and knowledge for this area. <b>None:</b> I have no experience with the outcome.	Mastery	Competent	Functional	Learning	None
6. Examine the role of community risk evaluation programs in Aboriginal Communities.					
▪ Describe community-based diabetes screening					
▪ Describe the Aboriginal Diabetes Initiative (ADI)					
▪ Examine implementation considerations of community-based diabetes screening programs in Aboriginal Communities					
7. Apply primary prevention strategies to increase public awareness and involvement.					
▪ Describe how to raise community awareness and involvement					
▪ Use a collaborative process to involve community in primary prevention strategies					

## PLAR assessment methods

If you qualify for PLAR, you may be asked to demonstrate your learning in one or more of the following ways. Be prepared to discuss the expectations during a consultation meeting.

### 1. Evidence file

- Evidence showing understanding of most recent clinical practice guidelines.
- A report highlighting skills and accomplishments that demonstrates how you have accomplished the stated learning outcomes. For example:
  - Written summary of your experience in primary prevention of diabetes.
  - Written discussion on your use of evidence-based decision making to support diabetes prevention strategies
- Certificate from a credited program, course or industry workshop/training with outcomes that encompass the learning outcomes of this course.
- Letter(s) of validation from employer or direct supervisor.
- Course outlines and content descriptions from non-credited training sessions.
- Copies of transcripts recording your academic education.

## 2. Written assignment A or B

- **A** You are asked to discuss specific determinants of health as diabetes risk factors that pertain to three clients Debbie, Ben and Robert. This assignment must be successfully completed prior to writing the written exam.
  - See [Appendix C for assignment directions and assignment rubric](#)
- Or:*
- **B** You are asked to consider implementing a risk factor awareness program for diabetes prevention in your community. This assignment must be successfully completed prior to writing the written exam.
  - See [Appendix C for assignment directions and assignment rubric](#)

**And**

## 3. Challenge exam

- Online multiple choice.
- See [Appendix A for challenge exam blueprint](#).

## Resources

Canadian Diabetes Association resources – see [www.diabetes.ca](http://www.diabetes.ca) to access relevant fact sheets and professional resources.

Most recent CDA Clinical practice guidelines for the prevention and management of diabetes in Canada – see [www.diabetes.ca](http://www.diabetes.ca) to access and download an electronic copy.

Refer to [Appendix B](#) for program booklist.

## EDUC 260 – The Education Process

Using the principles of adult learning, your studies will focus on the characteristics of all adult learners and the approaches used to enhance learning and healthy self-care practices. You will also use the Staged Model of Change in Practice to explore the behaviours that affect learning and your clients' readiness to learn.

**Credit unit(s):** 4.0

**Prerequisite(s):** HLTH 267 minimum grade of 60

<b>EDUC 260 – The Education Process</b> <b>Mastery:</b> I am able to demonstrate it well enough to teach it to someone else. <b>Competent:</b> I can work independently to apply the outcome. <b>Functional:</b> I need some assistance in using the outcome. <b>Learning:</b> I am developing skills and knowledge for this area. <b>None:</b> I have no experience with the outcome.	Mastery	Competent	Functional	Learning	None
1. Practice effective communication to enhance client/DHC team partnership.					
<ul style="list-style-type: none"> <li>▪ Analyze ways to improve interpersonal communication</li> </ul>					
<ul style="list-style-type: none"> <li>▪ Describe how to prevent communication barriers</li> </ul>					
<ul style="list-style-type: none"> <li>▪ Describe how language influences interpersonal communication in Diabetes care</li> </ul>					
2. Apply appropriate teaching/learning principles when educating clients and/or support person(s).					
<ul style="list-style-type: none"> <li>▪ Identify the components of, and barriers to, the teaching and learning process</li> </ul>					
<ul style="list-style-type: none"> <li>▪ Apply strategies to ensure the teaching approach suits the client with diabetes and/or support person(s)</li> </ul>					
3. Assess learning needs of client and/or support person(s).					
<ul style="list-style-type: none"> <li>▪ Describe the key aspects of assessment in the teaching/learning process</li> </ul>					
<ul style="list-style-type: none"> <li>▪ Assess clients' learning needs</li> </ul>					
4. Apply the staged model of behaviour change in practice.					
<ul style="list-style-type: none"> <li>▪ Describe the staged model of behaviour change</li> </ul>					
<ul style="list-style-type: none"> <li>▪ Apply the staged model of behaviour change</li> </ul>					
5. Facilitate motivation.					
<ul style="list-style-type: none"> <li>▪ Describe motivation</li> </ul>					
<ul style="list-style-type: none"> <li>▪ Facilitate motivation</li> </ul>					
6. Coordinate client education.					
<ul style="list-style-type: none"> <li>▪ Describe the planning phase of the education process</li> </ul>					
<ul style="list-style-type: none"> <li>▪ Describe the implementation phase of the education process</li> </ul>					
<ul style="list-style-type: none"> <li>▪ Plan to implement presentations to groups/audiences</li> </ul>					

<b>EDUC 260 – The Education Process</b>					
<b>Mastery:</b> I am able to demonstrate it well enough to teach it to someone else.	<b>Mastery</b>	<b>Competent</b>	<b>Functional</b>	<b>Learning</b>	<b>None</b>
<b>Competent:</b> I can work independently to apply the outcome.					
<b>Functional:</b> I need some assistance in using the outcome.					
<b>Learning:</b> I am developing skills and knowledge for this area.					
<b>None:</b> I have no experience with the outcome.					
7. Teach/promote healthy self care practices.					
▪ Describe the role of self care in diabetes management					
▪ Explain why ongoing education enhances self care					
▪ Teach/support client's self care practices					
8. Evaluate learning on an ongoing basis.					
▪ Describe the role of evaluation in the teaching and learning process					
▪ Evaluate learning					
9. Demonstrate ongoing commitment to lifelong learning.					
▪ Identify strategies to support lifelong learning					
▪ Demonstrate commitment to lifelong learning					

## PLAR assessment methods

If you qualify for PLAR, you may be asked to demonstrate your learning in one or more of the following ways. Be prepared to discuss the expectations during a consultation meeting.

### 1. Evidence file

- Certificate from a credited program, course or industry workshop/training with outcomes that encompass the learning outcomes of this course.
- Letter(s) of validation from employer or direct supervisor.
- Course outlines and content descriptions from non-credited training sessions

### 2. Assignment

- Interview assignment. You are asked to interview an individual living with diabetes to assess his/her teaching and learning needs related to self-management practices.
- See [Appendix C for assignment directions and assignment rubric.](#)

### 3. Challenge exam

- Online multiple choice.
- See [Appendix A for challenge exam blueprint.](#)

## Resources

Canadian Diabetes Association resources – see [www.diabetes.ca](http://www.diabetes.ca) to access relevant fact sheets and professional resources.

Most recent CDA clinical practice guidelines for the prevention and management of diabetes in Canada – see [www.diabetes.ca](http://www.diabetes.ca) to access and download an electronic copy.

Refer to [Appendix B](#) for program booklist.

## CLTR 260 – Cultural Considerations

Using cultural sensitivity as a guiding premise, your studies will focus on issues related to cultural diversity and how cultural beliefs, practices and traditions influence diabetes care and management. You will explore ways to ensure culturally sensitive care and education. You will also examine the benefits of culturally sensitive care.

**Credit unit(s):** 3.0

**Prerequisite(s):** EDUC 260 – The Education Process, minimum grade of 60

<b>CLTR 260 – Cultural Considerations</b> <b>Mastery:</b> I am able to demonstrate it well enough to teach it to someone else. <b>Competent:</b> I can work independently to apply the outcome. <b>Functional:</b> I need some assistance in using the outcome. <b>Learning:</b> I am developing skills and knowledge for this area. <b>None:</b> I have no experience with the outcome.	Mastery	Competent	Functional	Learning	None
1. Recognize different learning needs and styles.					
<ul style="list-style-type: none"> <li>▪ Identify aspects of cultural diversity</li> </ul>					
<ul style="list-style-type: none"> <li>▪ Describe different factors that affect learning needs of different cultural groups</li> </ul>					
<ul style="list-style-type: none"> <li>▪ Identify cultural barriers to diabetes care</li> </ul>					
<ul style="list-style-type: none"> <li>▪ Perform cultural assessment</li> </ul>					
2. Recognize need to verify beliefs.					
<ul style="list-style-type: none"> <li>▪ Describe how culture influences health beliefs</li> </ul>					
<ul style="list-style-type: none"> <li>▪ Describe strategies for working with clients from different cultural backgrounds</li> </ul>					
3. Identify language considerations.					
<ul style="list-style-type: none"> <li>▪ Identify how language influences diabetes education and management</li> </ul>					
<ul style="list-style-type: none"> <li>▪ Describe the effects of language barriers on client education and access to care</li> </ul>					
4. Use available community resources to enhance teaching and management.					
<ul style="list-style-type: none"> <li>▪ Identify available community resources</li> </ul>					
<ul style="list-style-type: none"> <li>▪ Use available community resources to enhance cultural competence</li> </ul>					
<ul style="list-style-type: none"> <li>▪ Develop culturally appropriate diabetes education resources</li> </ul>					
5. Facilitate discussions on strengths and cultural traditions and practices.					
<ul style="list-style-type: none"> <li>▪ Identify the connection between self-concept, self-esteem, and cultural identify</li> </ul>					
<ul style="list-style-type: none"> <li>▪ Describe how a meaning-centred process enhances self-concept and cultural identity</li> </ul>					
<ul style="list-style-type: none"> <li>▪ Facilitate discussions</li> </ul>					

<b>CLTR 260 – Cultural Considerations</b> <b>Mastery:</b> I am able to demonstrate it well enough to teach it to someone else. <b>Competent:</b> I can work independently to apply the outcome. <b>Functional:</b> I need some assistance in using the outcome. <b>Learning:</b> I am developing skills and knowledge for this area. <b>None:</b> I have no experience with the outcome.	Mastery	Competent	Functional	Learning	None
6. Demonstrate respect for different cultural traditions.					
<ul style="list-style-type: none"> <li>▪ Describe how cultural competence demonstrates a respect for cultural diversity</li> </ul>					
<ul style="list-style-type: none"> <li>▪ Demonstrate respect for cultural diversity through cultural competence</li> </ul>					
7. Recognize diabetes health care needs of First Nations, Métis and Inuit Peoples.					
<ul style="list-style-type: none"> <li>▪ Identify diabetes health care needs for First Nations, Métis and Inuit peoples</li> </ul>					
<ul style="list-style-type: none"> <li>▪ Identify communication strategies to enhance diabetes care/education needs of Aboriginal peoples</li> </ul>					
<ul style="list-style-type: none"> <li>▪ Identify resources to help facilitate Aboriginal peoples ability to meet their diabetes management needs</li> </ul>					

## PLAR assessment methods

If you qualify for PLAR, you may be asked to demonstrate your learning in one or more of the following ways. Be prepared to discuss the expectations during a consultation meeting.

### 1. Evidence file

- Certificate from a credited program, course or industry workshop/training with outcomes that encompass the learning outcomes of this course.
- A report highlighting skills and accomplishments that demonstrates how you have accomplished the stated learning outcomes. For example:
  - Written summary of how you demonstrate respect for cultural traditions when working with clients living with diabetes.
- Letter(s) of validation from employer or direct supervisor.
- Course outlines and content descriptions from non-credited training sessions.
- Copies of transcripts recording your academic education.

### 2. Written assignment

- You are to write a critique on the degree of cultural competence of the diabetes care services available in your own community.
- See [Appendix C for assignment directions and assignment rubric.](#)

**And**



### 3. Challenge exam

- Online multiple choice.
- See [Appendix A](#) for challenge exam blueprint.

### Resources

Canadian Diabetes Association resources – see [www.diabetes.ca](http://www.diabetes.ca) to access relevant fact sheets and professional resources.

Most recent CDA Clinical practice guidelines for the prevention and management of diabetes in Canada – see [www.diabetes.ca](http://www.diabetes.ca) to access and download an electronic copy.

Refer to [Appendix B](#) for program booklist.

## HLTH 269 – Nutrition Management

You will study both the principles of healthy eating and specifics of nutritional management of diabetes using review and practical exercises to help you apply this information. You will learn how to use one tool, *Just the Basics*, to provide nutrition education for people with diabetes. In addition, you will overview special nutritional needs that may be concurrent with diabetes (hypertension, dyslipidemia, nephropathy, gastropathy and weight management). You will review situations that require special considerations for nutrition management: using alcohol, dining out, vegetarian eating, travelling, and eating disorder. You will also consider the influence of cultural differences in eating on diabetes management

**Credit unit(s):** 4.0

**Prerequisite(s):** CLTR 260 – Cultural Considerations, minimum grade of 60%

<b>HLTH 269 – Nutrition Management</b>					
<b>Mastery:</b> I am able to demonstrate it well enough to teach it to someone else.					
<b>Competent:</b> I can work independently to apply the outcome.					
<b>Functional:</b> I need some assistance in using the outcome.					
<b>Learning:</b> I am developing skills and knowledge for this area.					
<b>None:</b> I have no experience with the outcome.					
	<b>Mastery</b>	<b>Competent</b>	<b>Functional</b>	<b>Learning</b>	<b>None</b>
1. Review components of a healthy meal plan.					
▪ Describe Canada’s Food Guide to Healthy Eating					
▪ Describe the importance of variety, key nutrients and other foods					
▪ Identify recommended servings and daily reference intakes					
2. Review CDA’s nutrition guidelines including the role of carbohydrates, protein and fat in the nutrition management of diabetes.					
▪ Describe the nutritional goals of diabetes management					
▪ Explain the role of carbohydrate, including sugars and fibre, in nutrition management					
▪ Describe the Glycemic Index (GI) and its role in diabetes management					
▪ Explain the role of sweeteners in nutrition management					
▪ Explain the role of protein and fats in nutrition management					
3. Identify systems of meal planning and nutrition teaching tools.					
▪ Describe the medical nutrition therapy and role of the dietician					
▪ Describe the components of a nutritional assessment					
▪ Review the Canadian meal planning tools/resources					
▪ Review carbohydrate counting					
▪ Describe principles of label reading					
4. Teach clients nutrition basics for diabetes management.					
▪ Discuss knowledge and skill needed for self-management					

<b>HLTH 269 – Nutrition Management</b> <b>Mastery:</b> I am able to demonstrate it well enough to teach it to someone else. <b>Competent:</b> I can work independently to apply the outcome. <b>Functional:</b> I need some assistance in using the outcome. <b>Learning:</b> I am developing skills and knowledge for this area. <b>None:</b> I have no experience with the outcome.	Mastery	Competent	Functional	Learning	None
<ul style="list-style-type: none"> <li>▪ Assess clients learning needs</li> </ul>					
<ul style="list-style-type: none"> <li>▪ Teach clients nutrition basics for diabetes management</li> </ul>					
<b>5. Recognize special nutritional needs.</b>					
<ul style="list-style-type: none"> <li>▪ Describe the role of nutrition therapy in the management of hypertension for people with diabetes</li> </ul>					
<ul style="list-style-type: none"> <li>▪ Describe the role of nutrition in the management of dyslipidemia</li> </ul>					
<ul style="list-style-type: none"> <li>▪ Describe the role of nutrition in the management of nephropathy</li> </ul>					
<ul style="list-style-type: none"> <li>▪ Describe the role of nutrition in the management of gastropathies</li> </ul>					
<b>6. Outline the principles of weight management.</b>					
<ul style="list-style-type: none"> <li>▪ Describe the various methods for classifying body weight</li> </ul>					
<ul style="list-style-type: none"> <li>▪ Identify the benefits of attaining/maintaining a healthy body weight in diabetes management</li> </ul>					
<ul style="list-style-type: none"> <li>▪ Discuss effective strategies for attaining/maintaining healthy body weight</li> </ul>					
<b>7. Recognize/identify special considerations in the nutritional management of diabetes.</b>					
<ul style="list-style-type: none"> <li>▪ Discuss the use of alcohol by people with diabetes</li> </ul>					
<ul style="list-style-type: none"> <li>▪ Discuss strategies for restaurant eating and travel</li> </ul>					
<ul style="list-style-type: none"> <li>▪ Discuss vegetarian eating in diabetes management</li> </ul>					
<ul style="list-style-type: none"> <li>▪ Identify nutrition related considerations for diabetes management when traveling</li> </ul>					
<ul style="list-style-type: none"> <li>▪ Explain the relationship between diabetes and eating disorders</li> </ul>					
<b>8. Discuss the influence of cultural differences and traditions on diabetes management.</b>					
<ul style="list-style-type: none"> <li>▪ Discuss the influence of culture on food and nutrition</li> </ul>					
<ul style="list-style-type: none"> <li>▪ Discuss the adaptations in nutrition education to be culturally sensitive.</li> </ul>					

**PLAR assessment methods**

If you qualify for PLAR, you may be asked to demonstrate your learning in one or more of the following ways. Be prepared to discuss the expectations during a consultation meeting.

### **1. Evidence file**

- Certificate from a credited program, course or industry workshop/training with outcomes that encompass the learning outcomes of this course.
- Letter(s) of validation from employer or direct supervisor.
- Course outlines and content descriptions from non-credited training sessions.
- Copies of transcripts recording your academic education

### **2. Written assignment**

- You will complete 3 nutrition education case study assignments.
- See [Appendix C for assignment directions and Assignment Rubric](#).

**And**

### **3. Challenge exam**

- Online multiple choice.
- See [Appendix A for challenge exam blueprint](#).

## **Resources**

Canadian Diabetes Association resources – see [www.diabetes.ca](http://www.diabetes.ca) to access relevant fact sheets and professional resources.

Most recent CDA Clinical practice guidelines for the prevention and management of diabetes in Canada – see [www.diabetes.ca](http://www.diabetes.ca) to access and download an electronic copy.

Refer to [Appendix B](#) for program booklist.

## HLTH 268 – Insulin and Oral Agents

You will study the oral diabetes medications and insulins used in diabetes management in Canada focusing on their actions, advantages/disadvantages of different regimes and principles of management. You will apply this information in client education, considering drug interactions and use of over-the-counter (OTC) medications. You will learn about complementary and alternative therapies and diabetes. You will become aware of financial support programs for people living with diabetes

**Credit unit(s):** 4.0

**Prerequisite(s):** HLTH 269 – Nutrition Management, minimum grade of 60%

<b>HLTH 268 – Insulin and Oral Agents</b> <b>Mastery:</b> I am able to demonstrate it well enough to teach it to someone else. <b>Competent:</b> I can work independently to apply the outcome. <b>Functional:</b> I need some assistance in using the outcome. <b>Learning:</b> I am developing skills and knowledge for this area. <b>None:</b> I have no experience with the outcome.	Mastery	Competent	Functional	Learning	None
1. Discuss actions of available oral agents for diabetes.					
▪ Identify background variables in selection of oral medications for diabetes					
▪ Match the classes of oral medications for diabetes					
▪ Recognize a treatment program with oral medications for diabetes					
▪ Describe potential side effects of oral medications for diabetes and drug interactions					
2. Teach about oral diabetes medications.					
▪ Discuss knowledge and skill needed for self management					
▪ Assess client learning needs					
▪ Teach clients about oral diabetes medications					
3. Review insulin and its use in diabetes management.					
▪ Identify insulin and its use in diabetes management					
▪ Study advantages and disadvantages of different insulin regimens					
▪ Outline key components of insulin administration procedure					
▪ Examine special considerations related to use of insulin					
4. Teach about insulin.					
▪ Discuss the knowledge and skills needed for self management					
▪ Assess client learning needs					
▪ Teach clients about insulin use					
5. Explain principles of insulin adjustment.					
▪ Identify variables that may influence the use of insulin					

<b>HLTH 268 – Insulin and Oral Agents</b>					
<b>Mastery:</b> I am able to demonstrate it well enough to teach it to someone else.	<b>Mastery</b>	<b>Competent</b>	<b>Functional</b>	<b>Learning</b>	<b>None</b>
<b>Competent:</b> I can work independently to apply the outcome.					
<b>Functional:</b> I need some assistance in using the outcome.					
<b>Learning:</b> I am developing skills and knowledge for this area.					
<b>None:</b> I have no experience with the outcome.					
▪ Study principles of basic insulin adjustment					
▪ Study principles for insulin management when traveling					
▪ Study principles for insulin management for shift workers					
6. Recognize over-the-counter (OTC) and complimentary/alternative therapies in diabetes.					
▪ Review over-the-counter (OTC) medications and diabetes					
▪ Examine complementary and alternative medications and treatments for diabetes					
7. Teach about OTC medications and alternative therapies.					
▪ Teach about OTC medications					
▪ Teach about alternative therapies					
8. Identify financial support programs.					
▪ Identify financial support programs					

### PLAR assessment methods

If you qualify for PLAR, you may be asked to demonstrate your learning in one or more of the following ways. Be prepared to discuss the expectations during a consultation meeting.

#### 1. Evidence file

- Certificate from a credited program, course or industry workshop/training with outcomes that encompass the learning outcomes of this course.
- Letter(s) of validation from employer or direct supervisor.
- Course outlines and content descriptions from non-credited training sessions.
- Copies of transcripts recording your academic education.

**And/or**

#### 2. Written assignment

- This case study assignment asks you to study a client’s health history and discuss why insulin therapy is indicated, propose a specific insulin regimen and discuss barriers to insulin use.
- See [Appendix C for assignment directions and Assignment Rubric.](#)

**And**

### 3. Challenge exam

- Multiple choice (online).
- See [Appendix A for challenge exam blueprint](#).

### Resources

Canadian Diabetes Association resources – see [www.diabetes.ca](http://www.diabetes.ca) to access relevant fact sheets and professional resources.

Most recent CDA clinical practice guidelines for the prevention and management of diabetes in Canada – see [www.diabetes.ca](http://www.diabetes.ca) to access and download an electronic copy.

Refer to [Appendix B](#) for program booklist.

## HLTH 270 – Activity Management

You will review the benefits of physical activity and its role in diabetes management. You will explore the limitations and barriers people living with diabetes face when incorporating physical activity into the management plan.

**Credit unit(s):** 3.0

**Prerequisite(s):** HLTH 268 – Insulin and Oral Agents, minimum grade of 60%

<b>HLTH 270 – Activity Management</b> <b>Mastery:</b> I am able to demonstrate it well enough to teach it to someone else. <b>Competent:</b> I can work independently to apply the outcome. <b>Functional:</b> I need some assistance in using the outcome. <b>Learning:</b> I am developing skills and knowledge for this area. <b>None:</b> I have no experience with the outcome.	Mastery	Competent	Functional	Learning	None
1. Review overall benefits of physical activity.					
▪ Review overall benefits of physical activity					
▪ Describe the effects of physical activity on people without diabetes					
▪ Identify the health risks of inactivity					
▪ Identify common misconceptions about physical activity					
2. Explain role of physical activity in diabetes management.					
▪ Describe the effects of physical activity on people with Type 1 Diabetes					
▪ Describe the effects of physical activity on people With Type 2 Diabetes					
3. Incorporate Canada’s Physical Activity Guidelines in diabetes management.					
▪ Identify Canada’s Physical Activity Guidelines for healthy active living.					
▪ Explain why Canada’ Physical Activity Guidelines are an essential tool in diabetes management.					
▪ Use Canada’s Physical Activity Guidelines to teach clients how to safely incorporate physical activity in management plan					
4. Recognize risks and/or barriers associated with physical activity for clients with diabetes.					
▪ Explain why a pre-exercise evaluation is important					
▪ Describe the pre-exercise evaluation					
▪ Describe the considerations for activity limitations in diabetes management					
▪ Identify strategies to reduce obstacles for becoming active					
5. Individualize activity plan for person(s) with diabetes.					
▪ Discuss the importance of individualizing activity management plan					
▪ Identify exercise guidelines for individuals with Type 2 Diabetes					



<b>HLTH 270 – Activity Management</b> <b>Mastery:</b> I am able to demonstrate it well enough to teach it to someone else. <b>Competent:</b> I can work independently to apply the outcome. <b>Functional:</b> I need some assistance in using the outcome. <b>Learning:</b> I am developing skills and knowledge for this area. <b>None:</b> I have no experience with the outcome.	Mastery	Competent	Functional	Learning	None
6. Identify physical activity teaching tools.					
<ul style="list-style-type: none"> <li>▪ Identify physical activity teaching tools</li> </ul>					

## PLAR assessment methods

If you qualify for PLAR, you may be asked to demonstrate your learning in one or more of the following ways. Be prepared to discuss the expectations during a consultation meeting.

### 1. Evidence file

- Certificate from a credited program, course or industry workshop/training with outcomes that encompass the learning outcomes of this course.
- Letter(s) of validation from employer or direct supervisor.
- Course outlines and content descriptions from non-credited training sessions.
- Copies of transcripts recording your academic education.

### 2. Written assignment

- See [Appendix C for assignment directions and assignment rubric.](#)

**And**

### 3. Challenge exam

- Multiple choice (online).
- See [Appendix A for challenge exam blueprint.](#)

## Resources

Canadian Diabetes Association resources – see [www.diabetes.ca](http://www.diabetes.ca) to access relevant fact sheets and professional resources.

Most recent CDA Clinical practice guidelines for the prevention and management of diabetes in Canada – see [www.diabetes.ca](http://www.diabetes.ca) to access and download an electronic copy.

Refer to [Appendix B](#) for program booklist.

## HLTH 271 – Complications: Acute and Chronic

You will examine the five major long-term complications of diabetes. Your studies will focus on support to the client in assessment, management and prevention strategies. You will also examine the physiological changes related to aging that increase the risks for diabetes complications.

**Credit unit(s):** 4.0

**Prerequisite(s):** HLTH 270 – Activity Management, minimum grade of 60%

<b>HLTH 271 – Complications: Acute and Chronic</b> <b>Mastery:</b> I am able to demonstrate it well enough to teach it to someone else. <b>Competent:</b> I can work independently to apply the outcome. <b>Functional:</b> I need some assistance in using the outcome. <b>Learning:</b> I am developing skills and knowledge for this area. <b>None:</b> I have no experience with the outcome.	Mastery	Competent	Functional	Learning	None
1. Teach how to prevent/manage hypo and hyperglycemia.					
<ul style="list-style-type: none"> <li>▪ Describe acute complications of diabetes mellitus</li> </ul>					
<ul style="list-style-type: none"> <li>▪ Describe effects of hypoglycemia</li> </ul>					
<ul style="list-style-type: none"> <li>▪ Describe role of self-blood glucose monitoring (SBGM) in prevention/management of acute complications</li> </ul>					
<ul style="list-style-type: none"> <li>▪ Describe role of ketone testing in prevention and management of hyperglycemia in Type 1 Diabetes</li> </ul>					
<ul style="list-style-type: none"> <li>▪ Individualize SBGM program</li> </ul>					
<ul style="list-style-type: none"> <li>▪ Teach how to prevent, detect and manage acute complications</li> </ul>					
2. Outline similarities and differences between DKA and HHNK.					
<ul style="list-style-type: none"> <li>▪ Describe diabetic ketoacidosis (DKA)</li> </ul>					
<ul style="list-style-type: none"> <li>▪ Describe Hyperosmolar Hyperglycemic Nonketotic Syndrome/State (HHNK)</li> </ul>					
<ul style="list-style-type: none"> <li>▪ Outline differences between DKA and HHNK</li> </ul>					
3. Teach guidelines for sick-day management.					
<ul style="list-style-type: none"> <li>▪ Review effect of illness/ infection on blood glucose</li> </ul>					
<ul style="list-style-type: none"> <li>▪ Teach general guidelines for sick-day management</li> </ul>					
4. Discuss microvascular complications.					
<ul style="list-style-type: none"> <li>▪ Discuss microvascular complications</li> </ul>					
<ul style="list-style-type: none"> <li>▪ Describe diabetic retinopathy and recommendations for management</li> </ul>					
<ul style="list-style-type: none"> <li>▪ Describe diabetic nephropathy and recommendations for management</li> </ul>					
<ul style="list-style-type: none"> <li>▪ Discuss preventative strategies for microvascular complications of diabetes</li> </ul>					
5. Discuss macrovascular complications.					

<b>HLTH 271 – Complications: Acute and Chronic</b> <b>Mastery:</b> I am able to demonstrate it well enough to teach it to someone else. <b>Competent:</b> I can work independently to apply the outcome. <b>Functional:</b> I need some assistance in using the outcome. <b>Learning:</b> I am developing skills and knowledge for this area. <b>None:</b> I have no experience with the outcome.	Mastery	Competent	Functional	Learning	None
<ul style="list-style-type: none"> <li>▪ Describe macrovascular disease</li> </ul>					
<ul style="list-style-type: none"> <li>▪ Discuss risk factors for macrovascular disease</li> </ul>					
<ul style="list-style-type: none"> <li>▪ Discuss strategies for lowering risk factors for macrovascular complications</li> </ul>					
<ul style="list-style-type: none"> <li>▪ Discuss the potential impact of medically prescribe non-diabetes medications</li> </ul>					
<b>6. Discuss neuropathy and diabetes foot problems.</b>					
<ul style="list-style-type: none"> <li>▪ Describe neuropathic conditions</li> </ul>					
<ul style="list-style-type: none"> <li>▪ Describe foot problems associated with diabetes</li> </ul>					
<ul style="list-style-type: none"> <li>▪ Discuss strategies to prevent neuropathy and diabetes foot problems</li> </ul>					
<b>7. Teach strategies to prevent and/or delay long-term complications.</b>					
<ul style="list-style-type: none"> <li>▪ Teach/reinforce strategies for preventing complications</li> </ul>					
<ul style="list-style-type: none"> <li>▪ Outline tests used to screen/monitor for long-term complications</li> </ul>					
<ul style="list-style-type: none"> <li>▪ Teach/reinforce guidelines for screening/monitoring to prevent and detect diabetes complications</li> </ul>					
<b>8. Teach skin, dental and foot care.</b>					
<ul style="list-style-type: none"> <li>▪ Teach importance of daily skin care to help prevent diabetes related skin problems</li> </ul>					
<ul style="list-style-type: none"> <li>▪ Teach strategies to prevent/detect dental problems</li> </ul>					
<ul style="list-style-type: none"> <li>▪ Teach self-care techniques to help prevent diabetes foot problems</li> </ul>					

### PLAR assessment methods

If you qualify for PLAR, you may be asked to demonstrate your learning in one or more of the following ways. Be prepared to discuss the expectations during a consultation meeting.

#### 1. Evidence file

- Certificate from a credited program, course or industry workshop/training with outcomes that encompass the learning outcomes of this course.
- Letter(s) of validation from employer or direct supervisor.
- Course outlines and content descriptions from non-credited training sessions.
- Copies of transcripts recording your academic education.

## 2. Written assignment

- You are asked to study the provided case of an adult male living with Type 1 Diabetes, and design an activity plan based on what you know about the client's data.
- See [Appendix C for assignment directions and assignment rubric.](#)

**And**

## 3. Challenge exam

- Multiple choice (online).
- See [Appendix A for challenge exam blueprint.](#)

## Resources

Canadian Diabetes Association resources – see [www.diabetes.ca](http://www.diabetes.ca) to access relevant fact sheets and professional resources.

Most recent CDA Clinical practice guidelines for the prevention and management of diabetes in Canada – see [www.diabetes.ca](http://www.diabetes.ca) to access and download an electronic copy.

Refer to [Appendix B](#) for program booklist.

## HLTH 272 – Diabetes Care Across the Lifespan

Using the Canadian Clinical Practice Guidelines for the prevention and management of Diabetes in Canada as a framework, you will examine optimum management strategies recommended for supporting all people living with diabetes. You will study gender-specific health issues in diabetes, and you will examine the physiological changes related to growth, development and aging and their effects on diabetes management. You will also study the psychosocial and mental health issues people living with a chronic illness experience.

**Credit unit(s):** 3.0

**Prerequisite(s):** HLTH 271 – Complications: Acute and Chronic, minimum grade of 60%

<b>HLTH 272 – Diabetes Care Across the Lifespan</b> <b>Mastery:</b> I am able to demonstrate it well enough to teach it to someone else. <b>Competent:</b> I can work independently to apply the outcome. <b>Functional:</b> I need some assistance in using the outcome. <b>Learning:</b> I am developing skills and knowledge for this area. <b>None:</b> I have no experience with the outcome.	<b>Mastery</b>	<b>Competent</b>	<b>Functional</b>	<b>Learning</b>	<b>None</b>
1. Discuss types of diabetes in children and adolescents.					
▪ Discuss the types of diabetes in children and adolescents					
▪ Discuss management of diabetes in children and adolescents					
▪ Discuss the prevention and care of acute complications in children and adolescents with diabetes					
2. Recognize special needs of children and adolescents living with diabetes.					
▪ Discuss effects of diabetes on children and adolescents					
▪ Discuss the challenges of managing childhood/adolescent diabetes					
▪ Discuss psychosocial issues of children/adolescents living with diabetes					
▪ Discuss the management of special events for children and adolescents with diabetes					
3. Discuss diabetes management in pregnancy.					
▪ Describe gestational diabetes (GDM)					
▪ Discuss management strategies for GDM					
▪ Discuss the need for pre-pregnancy counselling in women with pre-existing diabetes					
▪ Discuss effects of pregnancy on women with pre-existing diabetes					
▪ Discuss management of diabetes during pregnancy					
4. Discuss gender specific health issues in diabetes management.					
▪ Describe special health concerns of women with diabetes					
▪ Describe polycystic ovary syndrome (PCOS) and its link to diabetes					
▪ Discuss how menopause affects diabetes and diabetes management					

<b>HLTH 272 – Diabetes Care Across the Lifespan</b> <b>Mastery:</b> I am able to demonstrate it well enough to teach it to someone else. <b>Competent:</b> I can work independently to apply the outcome. <b>Functional:</b> I need some assistance in using the outcome. <b>Learning:</b> I am developing skills and knowledge for this area. <b>None:</b> I have no experience with the outcome.	Mastery	Competent	Functional	Learning	None
<ul style="list-style-type: none"> <li>▪ Describe effects of diabetes on sexual and reproductive function of men with diabetes</li> </ul>					
5. Discuss diabetes in older adults.					
<ul style="list-style-type: none"> <li>▪ Discuss the prevalence of diabetes in the older adult.</li> </ul>					
<ul style="list-style-type: none"> <li>▪ Describe the pathogenesis of diabetes in older adults</li> </ul>					
<ul style="list-style-type: none"> <li>▪ Discuss the recommendations for managing diabetes in older adults</li> </ul>					
<ul style="list-style-type: none"> <li>▪ Discuss how physiological changes of aging affect diabetes management</li> </ul>					
<ul style="list-style-type: none"> <li>▪ Discuss strategies for teaching older adults about diabetes and diabetes management</li> </ul>					
6. Recognize mental health issues related to living with a chronic disease.					
<ul style="list-style-type: none"> <li>▪ Discuss the impact of diabetes on psychological and mental health of person(s) living with diabetes</li> </ul>					
<ul style="list-style-type: none"> <li>▪ Discuss psychosocial barriers to diabetes management</li> </ul>					
<ul style="list-style-type: none"> <li>▪ Describe the relationship between depression and diabetes</li> </ul>					
<ul style="list-style-type: none"> <li>▪ Discuss interventions diabetes educators/care providers can use when clients with diabetes experience mental health issues</li> </ul>					
7. Assist client to meet psychosocial needs.					
<ul style="list-style-type: none"> <li>▪ Discuss the diabetes educator/health care provider’s role in assisting client to meet psychosocial needs</li> </ul>					
<ul style="list-style-type: none"> <li>▪ Assist clients to meet their psychosocial needs in living with diabetes</li> </ul>					
8. Recognize quality of life issues.					
<ul style="list-style-type: none"> <li>▪ Discuss quality of life issues for people living with diabetes</li> </ul>					
<ul style="list-style-type: none"> <li>▪ Describe effects of long-term complications on quality of life</li> </ul>					
<ul style="list-style-type: none"> <li>▪ Describe impact of research on quality of life in people with diabetes</li> </ul>					
<ul style="list-style-type: none"> <li>▪ Discuss ways educators/care providers can foster clients’ quality of life</li> </ul>					

## PLAR assessment methods

If you qualify for PLAR, you may be asked to demonstrate your learning in one or more of the following ways. Be prepared to discuss the expectations during a consultation meeting.

### 1.

### 2. Evidence file

- Certificate from a credited program, course or industry workshop/training with outcomes that encompass the learning outcomes of this course.
- Letter(s) of validation from employer or direct supervisor.
- Course outlines and content descriptions from non-credited training sessions.
- Copies of transcripts recording your academic education.

### 3. Challenge exam

- You are asked to compare and contrast the experience of an adult female living with diabetes and the experience of an adult male living with diabetes.
  - See [Appendix C for assignment directions and assignment rubric](#).

And

### 4. Challenge exam

- Multiple choice (online).
- See [Appendix A for challenge exam blueprint](#).

## Resources

Canadian Diabetes Association resources – see [www.diabetes.ca](http://www.diabetes.ca) to access relevant fact sheets and professional resources.

Most recent CDA Clinical practice guidelines for the prevention and management of diabetes in Canada – see [www.diabetes.ca](http://www.diabetes.ca) to access and download an electronic copy.

Refer to [Appendix B](#) for program booklist.

## HLTH 273 – Lab Component

You will explore the role of community development and capacity building in diabetes prevention and management. You will be introduced to the principles of motivational interviewing and have an opportunity to practice these principles. You will look at how current issues and trends affect diabetes care, prevention and education. You will practice performing a foot assessment.

**Credit unit(s):** 1.0

**Prerequisite(s):** CLTR 260, minimum grade of 60

<b>HLTH 273 – Lab Component</b> <b>Mastery:</b> I am able to demonstrate it well enough to teach it to someone else. <b>Competent:</b> I can work independently to apply the outcome. <b>Functional:</b> I need some assistance in using the outcome. <b>Learning:</b> I am developing skills and knowledge for this area. <b>None:</b> I have no experience with the outcome.	<b>Mastery</b>	<b>Competent</b>	<b>Functional</b>	<b>Learning</b>	<b>None</b>
1. Explore the role of community development in diabetes prevention.					
▪ Review the determinants of health					
▪ Review the key elements of Population Health Promotion					
▪ Review the role of community development in health promotion					
▪ Explore the role of community development in diabetes prevention					
2. Use motivational interviewing techniques in diabetes prevention, care and management.					
▪ Review the characteristics and basic principles of the Staged Model of Behaviour Change					
▪ Apply the theoretical components of the five stages of behaviour change to client statements and/or behaviours					
▪ Demonstrate basic skills in counselling clients with a behaviour in pre-contemplation					
▪ Develop a personal behaviour change plan regarding motivation interviewing and its use in client education					
3. Discuss current issues and trends in diabetes management.					
▪ Discuss current issues and trends in diabetes prevention and management					
4. Perform basic foot assessment.					
▪ Identify the foot at risk					
▪ Review tools used to screen for PVD and alterations in sensation					
▪ Identify preventative foot strategies for foot at risk					
▪ Perform foot assessment					



## PLAR assessment methods

If you qualify for PLAR, you may be asked to demonstrate your learning in one or more of the following ways. Be prepared to discuss the expectations during a consultation meeting.

### 1. Evidence file

- Certificate from a credited program, course or industry workshop/training with outcomes that encompass the learning outcomes of this course.
- A report highlighting skills and accomplishments that demonstrates how you have accomplished the stated learning outcomes. For example:
  - Written summary of how your involvement in a community development project aimed at diabetes prevention.
- Letter(s) of validation from employer or direct supervisor.
- Course outlines and content descriptions from non-credited training sessions.
- Copies of transcripts recording your academic education.

### 2. Written assignment

- **Audio Tape assignment:** You will prepare an audiotape of your use of motivational interviewing techniques in diabetes prevention with a client at risk for diabetes.
- **Written assignment:** You will examine the foot at risk by answering questions related to signs and symptoms, screening tools for PVD and assessment of the foot at risk.
- **Video assignment:** Video performance on a client with diabetes. You will provide a videotape of yourself completing a foot assessment on a client with diabetes.
- See [Appendix C for assignment directions and assignment rubrics](#).

## Resources

Canadian Diabetes Association resources – see [www.diabetes.ca](http://www.diabetes.ca) to access relevant fact sheets and professional resources.

Most recent CDA Clinical practice guidelines for the prevention and management of diabetes in Canada – see [www.diabetes.ca](http://www.diabetes.ca) to access and download an electronic copy.

Refer to [Appendix B](#) for program booklist.

## CLIN 231 – Clinical Component

The clinical component consists of a 60 hour clinical experience that integrates the theory you learned and the lab component. Your clinical experiences will be scheduled in an agency chosen by you in conjunction with the faculty of the Advanced Diabetes Education for Health Care Professionals Program. An experienced agency staff member will guide and direct you, and evaluate your competence. You will be expected to demonstrate responsibility and accountability for your own learning. You will be in an unpaid student role and require time off work to complete the clinical component.

**Credit unit(s):** 4.0

**Prerequisite(s):** Only applicants who are currently **diabetes educators** are eligible to PLAR CLIN 231. HLTH 272, HLTH 273

<b>CLIN 231 – Clinical Component</b> <b>Mastery:</b> I am able to demonstrate it well enough to teach it to someone else. <b>Competent:</b> I can work independently to apply the outcome. <b>Functional:</b> I need some assistance in using the outcome. <b>Learning:</b> I am developing skills and knowledge for this area. <b>None:</b> I have no experience with the outcome.	Mastery	Competent	Functional	Learning	None
1. Demonstrate knowledge-based practice in the area of health promotion and the primary prevention of diabetes.					
▪ Discuss the role of health promotion in primary prevention of diabetes					
▪ Promotes healthy lifestyle					
▪ Discuss the role of evidence-based decision making in diabetes prevention					
▪ Recognize the role of community risk evaluation					
▪ Demonstrate an awareness of community development in health promotion and diabetes prevention					
▪ Use appropriate resources/strategies (literature, community, significant others, peers, health care team) to promote healthy living					
2. Demonstrate knowledge-based practice in the area of diabetes education, care and management.					
▪ Demonstrate knowledge of normal metabolism, insulin function and the pathophysiology of diabetes					
▪ Outline diabetes diagnostic criteria					
▪ Teach about diabetes management					
▪ Perform assessment of clients(s) diabetes care needs					
▪ Discuss the role of evidence-based decision making in diabetes management					
▪ Recognize the role of individualized diabetes management plan					
▪ Demonstrate awareness of how health status influences diabetes care and management needs					
▪ Adapt teaching/learning plan to meet needs of client and family/support person(s)					
3. Apply principles of adult learning in client health teaching.					

<b>CLIN 231 – Clinical Component</b> <b>Mastery:</b> I am able to demonstrate it well enough to teach it to someone else. <b>Competent:</b> I can work independently to apply the outcome. <b>Functional:</b> I need some assistance in using the outcome. <b>Learning:</b> I am developing skills and knowledge for this area. <b>None:</b> I have no experience with the outcome.	Mastery	Competent	Functional	Learning	None
<ul style="list-style-type: none"> <li>▪ Use principles of adult learning in client health teaching</li> </ul>					
<ul style="list-style-type: none"> <li>▪ Utilize a variety of strategies to enhance client diabetes education</li> </ul>					
<ul style="list-style-type: none"> <li>▪ Recognize factors that influence clients’ readiness to learn</li> </ul>					
<ul style="list-style-type: none"> <li>▪ Demonstrate awareness of the Stages of Behavior Change Model and its role in diabetes care/prevention</li> </ul>					
<ul style="list-style-type: none"> <li>▪ Use variety of educational mediums when presenting to groups</li> </ul>					
<b>4. Assess, develop and implement teaching plan for clients with diabetes in conjunction with other health care providers.</b>					
<ul style="list-style-type: none"> <li>▪ Incorporate the four elements of assessment, planning, implementation and evaluation in the education process</li> </ul>					
<ul style="list-style-type: none"> <li>▪ Collaborate with the client, family/support person(s) and other health care providers to develop the clients’ teaching/learning plan</li> </ul>					
<ul style="list-style-type: none"> <li>▪ Individualize teaching plan to meet clients’ needs, preferences and learning styles</li> </ul>					
<ul style="list-style-type: none"> <li>▪ Reinforce teaching/learning plan of other health care providers</li> </ul>					
<ul style="list-style-type: none"> <li>▪ Implement teaching to meet learning needs of client and family/support person(s)</li> </ul>					
<ul style="list-style-type: none"> <li>▪ Utilizes a variety of strategies to enhance client teaching</li> </ul>					
<b>5. Participate in evaluation and modification of clients’ diabetes management plan.</b>					
<ul style="list-style-type: none"> <li>▪ Collaborate with other health care providers in evaluating the clients’ diabetes management plan</li> </ul>					
<ul style="list-style-type: none"> <li>▪ Modifies the clients’ diabetes management plan in conjunction with other health care providers</li> </ul>					
<b>6. Perform assessments, treatments and procedures in collaboration with client, family and other Health care team members in safe and caring manner.</b>					
<ul style="list-style-type: none"> <li>▪ Carry out assessments, treatments and procedures consistent with course theory, established goals and agency policy</li> </ul>					
<ul style="list-style-type: none"> <li>▪ Provide sound rationale for actions and/or teaching /reinforcement of teaching</li> </ul>					
<ul style="list-style-type: none"> <li>▪ Implement and/or adapt actions safely according to changes in client’s health status</li> </ul>					
<ul style="list-style-type: none"> <li>▪ Collaborate with other health care providers</li> </ul>					
<b>7. Communicate effectively with clients/family/support person(s) and members of health care team.</b>					

<b>CLIN 231 – Clinical Component</b> <b>Mastery:</b> I am able to demonstrate it well enough to teach it to someone else. <b>Competent:</b> I can work independently to apply the outcome. <b>Functional:</b> I need some assistance in using the outcome. <b>Learning:</b> I am developing skills and knowledge for this area. <b>None:</b> I have no experience with the outcome.	Mastery	Competent	Functional	Learning	None
<ul style="list-style-type: none"> <li>Interact appropriately with client(s), family/support person(s) and members of health care team by: a) active listening; b) attending behavior; c) showing empathy, respect and genuineness; d) being tactful, considerate and courteous</li> </ul>					
<ul style="list-style-type: none"> <li>Provide accurate explanations and clear directions for the client and their family/support person(s)</li> </ul>					
<ul style="list-style-type: none"> <li>Report pertinent information accurately and effectively about clients' diabetes care needs/health state to preceptor/instructor and /or the appropriate health care team member</li> </ul>					
<b>8. Demonstrate respect for cultural differences, traditions, and health care beliefs.</b>					
<ul style="list-style-type: none"> <li>Demonstrate awareness of cultural differences and health beliefs in diabetes self-management</li> </ul>					
<ul style="list-style-type: none"> <li>Demonstrate respect for cultural differences and health beliefs</li> </ul>					
<ul style="list-style-type: none"> <li>Use culturally appropriate tools/resources when working with clients and/or when presenting to groups</li> </ul>					
<ul style="list-style-type: none"> <li>Individualize teaching plan to accommodate clients' cultural beliefs and traditions</li> </ul>					
<b>9. Practice within parameters of the clinical agency's policies, philosophy and procedures.</b>					
<ul style="list-style-type: none"> <li>Adhere to established agency policies, schedules and routines</li> </ul>					
<ul style="list-style-type: none"> <li>Comply with institutional practices</li> </ul>					
<ul style="list-style-type: none"> <li>Demonstrate professional behaviour</li> </ul>					
<b>10. Keep current with new knowledge and skills.</b>					
<ul style="list-style-type: none"> <li>Formulate a learning contract including goals, learning resources and strategies, evidence of accomplishment and criteria for evaluating evidence</li> </ul>					
<ul style="list-style-type: none"> <li>Review learning contract with clinical preceptor/instructor to ensure successful attainment of clinical learning goals</li> </ul>					
<ul style="list-style-type: none"> <li>Complete learning contract during clinical experience</li> </ul>					
<ul style="list-style-type: none"> <li>Prepare for clinical experience by reviewing course materials and appropriate materials</li> </ul>					
<ul style="list-style-type: none"> <li>Take initiative in seeking out learning experiences</li> </ul>					
<ul style="list-style-type: none"> <li>Take initiative in seeking clarification or guidance</li> </ul>					
<ul style="list-style-type: none"> <li>Adhere to policies and procedures of Saskatchewan Polytechnic</li> </ul>					

## PLAR assessment methods

If you qualify for PLAR, you may be asked to demonstrate your learning in one or more of the following ways. Be prepared to discuss the expectations during a consultation meeting.

### 1. Evidence file

- Your immediate supervisor must complete a letter of endorsement/recommendation indicating that you consistently provide competent and caring practice in the area of diabetes education. The more specific and thorough the recommendation letter, the more helpful it is in assessing and recognizing prior learning.
- Only applicants who are currently **diabetes educators** are eligible to PLAR CLIN 231.
- You must submit a completed Student Evaluation of clinical performance form. This form must **also** be completed by your immediate supervisor. Refer to [Appendix D](#) for copy of the clinical evaluation form.
- To be successful, you must receive a rating performance of **4** for each criterion on the form. The following performance rating scale is to be used for the evaluation.
  - A "1" rating indicates that the experience has been unavailable or unobserved.
  - A "2" rating indicates that the applicant is not performing at the expected level.
  - A "3" rating indicates that the applicant is demonstrating growth but requires more experience to perform at the expected level.
  - A "4" rating indicates that the applicant is consistently performing at the expected level of performance.
  - A "5" rating indicates that the applicant consistently exceeds the expected level of performance.

## Resources

Canadian Diabetes Association resources – see [www.diabetes.ca](http://www.diabetes.ca) to access relevant fact sheets and professional resources.

Most recent CDA Clinical practice guidelines for the prevention and management of diabetes in Canada – see [www.diabetes.ca](http://www.diabetes.ca) to access and download an electronic copy.

Refer to [Appendix B](#) for program booklist.

# **Diabetes Education for Health Care Professionals**

## Appendices

## Appendix A: Challenge exam blueprints

### HLTH 266 – Diabetes Management: A Review

Learning outcome/objective	Number of questions
1. Describe euglycemia	3
2. Describe the role of the pancreas in normal glucose homeostasis	4
3. Identify the body's main sources of fuel	5
4. Review the pathophysiology of diabetes	3
5. Describe the different types of diabetes	8
6. Describe insulin resistance	8
7. Outline the risk factors for type 2 diabetes	4
8. Define the term epidemiology and demography	7
9. Outline diagnostic criteria	5
10. Describe screening procedures	3
11. Describe the appropriate screening procedure in primary prevention of diabetes	2
12. Identify high-risk target groups	2
13. Define clinical practice guidelines	1
14. Describe the role of CPG in diabetes care	1
15. Describe how evidence is used to support CPG recommendations	2
16. Identify the tools of diabetes management	4
17. Describe the goals of management	2
18. Discuss the culture of safety and its role in diabetes management	1
19. Describe the diabetes health care team	2
20. Describe partnership and the partnership process	5
21. Describe the client's role on the diabetes health care team	1
22. Identify common diabetes myths	2
<b>Total</b>	<b>75</b>

## HLTH 267 – Primary Prevention

Learning outcome/objective	Number of questions
1. Define primary prevention and secondary prevention	2
2. Describe the link between the determinants of health and the primary prevention of diabetes	5
3. Describe the modifiable risk factors for diabetes	2
4. Describe health promotion priorities for primary and secondary prevention strategies	6
5. Use basic health promotion guidelines to teach about healthy eating, active living and healthy weight.	4
6. Use population health promotion strategies aimed at the primary prevention of diabetes.	2
7. Describe evidence-based practice.	3
8. Use evidence to support primary prevention strategies for reducing risks of Type 2 Diabetes	5
9. Describe community-based diabetes screening	3
10. Describe the benefits of community-based screening and prevention projects for diabetes in aboriginal communities	3
11. Describe implementation considerations of a community-based diabetes screening program	1
12. Describe the aboriginal diabetes initiative (ADI)	2
13. Describe community development and community development principles	4
14. Describe community capacity building	3
15. Describe the community development process	3
16. Use community development principles in community health development	4
17. Describe how to raise community awareness	3
18. Describe how to use available community resources	2
19. Describe how poverty affects health	3
<b>Total</b>	<b>60</b>



## EDUC 260 – The Education Process

Learning outcome/objective	Number of questions
1. Describe interpersonal communication	3
2. Describe ways to improve interpersonal communication	5
3. Describe how language influences interpersonal communication in diabetes care	3
4. Describe how to prevent communication barriers	3
5. Identify the components of the teaching and learning process	3
6. Describe the learning process	14
7. Describe strategies to ensure teaching approach suits the client with diabetes and/or support person(s)	2
8. Describe barriers to the teaching and learning process	3
9. Describe the key aspects of assessment in the teaching/learning process	5
10. Describe the importance of assessing clients learning needs	4
11. Describe the role of self-care in diabetes management	8
12. Describe the role of client in diabetes self-care	2
13. Explain why ongoing education enhances self-management	2
14. Describe the role of health care provider in teaching/supporting self-care	2
15. Identify barriers to supporting client's self-care management	2
16. Describe the staged model of behaviour change and its characteristics	9
17. Describe how to use the staged model of behaviour change in practice	2
18. Describe motivation	3
19. Describe what motivates adults to learn	5
20. Describe how to facilitate motivation	3
21. Describe the planning phase of the education process	2
22. Describe the implementation phase of the education process	2
23. Coordinate the planning and implementation roles for presenting to groups/audience	4
24. Describe the role of evaluation in the teaching and learning process	2

Learning outcome/objective	Number of questions
25. Evaluate learning	2
26. Identify the benefits of lifelong learning	2
27. Demonstrate commitment to lifelong learning.	3
<b>Total</b>	<b>100</b>

## CLTR 260 – Cultural Considerations

Learning outcome/objective	Number of questions
1. Identify aspects of cultural sensitivity.	7
2. Describe different factors that affect learning needs of different cultural groups.	3
3. Identify cultural barriers to diabetes care.	4
4. Perform cultural assessment.	3
5. Describe how culture influences health beliefs.	3
6. Describe strategies for working with clients from different cultural backgrounds.	3
7. Identify how language influences diabetes education and management.	4
8. Describe the effects of language barriers on client education and access to care.	3
9. Identify available community resources.	2
10. Use available community resources to enhance cultural competence.	2
11. Develop culturally appropriate diabetes education resources.	2
12. Identify the connection between self-concept, self-esteem, and cultural identity.	3
13. Describe how a meaning-centred process enhances self-concept and cultural identities facilitate discussions.	2
14. Facilitate discussions.	1
15. Describe how cultural competence demonstrates a respect for cultural diversity	4
16. Demonstrate respect for cultural diversity through cultural competence	2
17. Identify diabetes health care needs for First Nations, Métis and Inuit Peoples	7
18. Identify communication strategies to enhance diabetes care/education needs of Aboriginal Peoples	4
19. Identify resources to help facilitate Aboriginal Peoples' ability to meet their diabetes management needs	1
<b>Total</b>	<b>60</b>

## HLTH 269 – Nutrition Management

Learning outcome/objective	Number of questions
1. Describe Canada's Food Guide to Healthy Eating.	5
2. Describe the importance of variety, key nutrients and other foods.	5
3. Identify recommended servings and daily reference intakes.	2
4. Describe the nutritional goals of diabetes management.	2
5. Explain the role of carbohydrate, including sugars and fibre, in nutrition management.	5
6. Discuss the Glycemic Index (GI) and its role in diabetes management.	2
7. Explain the role of sweeteners in nutrition management.	2
8. Explain the role of protein and fats in nutrition management.	4
9. Describe medical nutrition therapy and role of the dietitian.	2
10. Describe the components of a nutritional assessment.	2
11. Review the Canadian meal planning tools/resources.	3
12. Review carbohydrate counting.	2
13. Describe principles of label reading.	2
14. Discuss knowledge and skill needed for self-management.	2
15. Assess client learning needs.	2
16. Teach clients nutrition basics for diabetes management.	3
17. Describe the role of nutrition therapy in the management of hypertension for people with diabetes.	3
18. Describe the role of nutrition in the management of dyslipidemia.	3
19. Describe the role of nutrition in the management of nephropathy.	2
20. Describe the role of nutrition in the management of gastropathies.	1
21. Describe the various methods for classifying body weight.	3
22. Identify the benefits of attaining/maintaining a healthy body weight in diabetes management.	2
23. Discuss effective strategies for attaining/maintaining healthy body weight.	3

Learning outcome/objective	Number of questions
24. Discuss the use of alcohol by people with diabetes.	22
25. Discuss strategies for restaurant eating and travel.	1
26. Discuss vegetarian eating in diabetes management.	2
27. Identify nutrition related considerations for diabetes management when traveling.	2
28. Explain the relationship between diabetes and eating disorders.	1
29. Discuss the influence of culture on food and nutrition.	2
30. Discuss the adaptations in nutrition education to be culturally sensitive.	3
<b>Total</b>	<b>75</b>

## HLTH 268 – Insulin and Oral Agents

Learning outcome/objective	Number of questions
1. Identify background variables in selection of oral medications for diabetes.	3
2. Discuss the classes of oral medications for diabetes.	8
3. Recognize a treatment program with oral medications for diabetes.	4
4. Discuss potential side effects of oral medications for diabetes and drug interactions.	5
5. Discuss knowledge and skill needed for self management.	3
6. Assess client learning needs.	3
7. Teach clients about oral diabetes medications.	2
8. Describe actions of different types of insulin.	5
9. Discuss advantages and disadvantages of different insulin regimens.	4
10. Outline key components of insulin administration procedure.	3
11. Discuss special considerations related to use of insulin.	1
12. Discuss the knowledge and skills needed for self management.	3
13. Assess client learning needs.	3
14. Teach clients about insulin use.	3
15. Describe variables that may influence the use of insulin.	2
16. Describe principles of basic insulin adjustment.	2
17. Describe principles for insulin management when traveling.	2
18. Describe principles for insulin management for shift workers.	1
19. Discuss over-the-counter (OTC) medications and diabetes.	3
20. Discuss complimentary and alternative therapies for diabetes.	2
21. Teach about OTC medications.	3
22. Teach about alternative therapies.	2
23. Identify financial support programs	2
<b>Total</b>	<b>70</b>

## HLTH 270 – Activity Management

Learning outcome/objective	Number of questions
1. Review overall benefits of physical activity	3
2. Describe the effects of physical activity on people without diabetes	5
3. Identify the health risks of inactivity	2
4. Identify common misconceptions about physical activity	2
5. Describe the effects of physical activity on people with type 1 diabetes	7
6. Describe the effects of physical activity on people with type 2 diabetes	4
7. Identify Canada's Physical Activity Guidelines for healthy active living.	2
8. Explain why Canada's Physical Activity Guidelines are an essential tool in diabetes management.	2
9. Use Canada's Physical Activity Guidelines to teach clients how to safely incorporate physical activity in management plan	3
10. Explain why a pre-exercise evaluation is important	4
11. Describe the pre-exercise evaluation	2
12. Describe the considerations for activity limitations in diabetes management	2
13. Identify strategies to reduce obstacles for becoming active	2
14. Discuss the importance of individualizing activity management plan	4
15. Identify exercise guidelines for individuals with type 2 diabetes	4
16. Identify exercise guidelines for individuals with type 1 diabetes	6
17. Identify physical activity teaching tools	1
<b>Total</b>	<b>55</b>

## HLTH 271 – Complications: Acute and Chronic

Learning outcome/objective	Number of questions
1. Describe acute complications of diabetes mellitus.	8
2. Describe effects of hypoglycemia.	4
3. Describe role of self-blood glucose monitoring (SBGM) in prevention/management of acute complications.	4
4. Describe role of ketone testing in prevention and management of hyperglycemia in Type 1 Diabetes.	2
5. Individualize SBGM program.	2
6. Teach how to prevent, detect and manage acute complications.	4
7. Describe diabetic ketoacidosis (DKA).	3
8. Describe Hyperosmolar Hyperglycemic Nonketotic Syndrome/State (HHNK).	2
9. Outline similarities & differences between DKA and HHNK.	3
10. Review effect of illness/ infection on blood glucose.	2
11. Teach general guidelines for sick-day management.	2
12. Discuss microvascular complications.	2
13. Describe diabetic retinopathy and recommendations for management.	3
14. Describe diabetic nephropathy and recommendations for management.	3
15. Discuss preventative strategies for microvascular complications of diabetes.	3
16. Describe macrovascular disease.	3
17. Discuss risk factors for macrovascular disease.	3
18. Discuss strategies for lowering risk factors for macrovascular complications.	5
19. Discuss the potential impact of medically prescribe non-diabetes medications.	2
20. Describe neuropathic conditions.	3
21. Describe foot problems associated with diabetes.	2
22. Discuss strategies to prevent neuropathy and diabetes foot problems.	2
23. Discuss strategies to assess for and manage neuropathy and diabetes foot problems.	2
24. Teach/reinforce strategies for preventing complications.	4
25. Outline tests used to screen/monitor for long-term complications.	1



Learning outcome/objective	Number of questions
26. Teach/reinforce guidelines for screening/monitoring to prevent and detect diabetes complications.	1
27. Teach importance of daily skin care to help prevent diabetes related skin problems.	1
28. Teach strategies to prevent/detect dental problems.	1
29. Teach self-care techniques to help prevent diabetes foot problems.	4
<b>Total</b>	<b>80</b>

## HLTH 272 – Diabetes Care Across the Lifespan

Learning outcome/objective	Number of questions
1. Discuss the types of diabetes in children and adolescents.	5
2. Discuss management of diabetes in children and adolescents.	6
3. Discuss the prevention and care of acute complications in children and adolescents with diabetes.	5
4. Discuss effects of diabetes on children and adolescents.	5
5. Discuss the challenges of managing childhood/adolescent diabetes.	5
6. Discuss psychosocial issues of children/adolescents living with diabetes.	4
7. Discuss the management of special events for children and adolescents with diabetes.	1
8. Describe gestational diabetes (GDM).	5
9. Discuss management strategies for GDM.	2
10. Discuss the need for pre-pregnancy counselling in women with pre-existing diabetes.	4
11. Discuss effects of pregnancy on women with pre-existing diabetes.	3
12. Discuss management of diabetes during pregnancy.	3
13. Describe special health concerns of women with diabetes.	6
14. Describe polycystic ovary syndrome (PCOS) and its link to diabetes.	2
15. Discuss how menopause affects diabetes and diabetes management.	2
16. Describe effects of diabetes on sexual and reproductive function of men with diabetes.	2
17. Discuss the prevalence of diabetes in the older adult.	3
18. Describe the pathogenesis of diabetes in older adults.	4
19. Discuss the recommendations for managing diabetes in older adults.	7
20. Discuss how physiological changes of aging affect diabetes management.	2
21. Discuss strategies for teaching older adults about diabetes and diabetes management.	4
22. Discuss the impact of diabetes on psychological and mental health of person(s) living with diabetes.	3
23. Discuss psychosocial barriers to diabetes management.	2
24. Describe the relationship between depression and diabetes.	2

Learning outcome/objective	Number of questions
25. Discuss interventions diabetes educators/care providers can use when clients with diabetes experience mental health issues.	3
26. Discuss the diabetes educator/health care provider's role in assisting client to meet psychosocial needs.	2
27. Assist clients to meet their psychosocial needs in living with diabetes.	2
28. Discuss quality of life issues for people living with diabetes.	3
29. Describe effects of long-term complications on quality of life.	1
30. Describe impact of research on quality of life in people with diabetes.	1
31. Discuss ways educators/care providers can foster clients' quality of life.	1
<b>Total</b>	<b>100</b>

## Appendix B: Basic Diabetes Education for Health Care Professionals program booklist



### Diabetes Education for Health Care Professionals program booklist: 2014-15

Text
<i>Joslin's diabetes deskbook: A guide for primary care providers.</i> Richard S. Beaser & staff of Joslin Diabetes Center, Joslin Diabetes Center, Boston, MA. Revised 3rd Ed.
Canadian Diabetes Association <i>Current Clinical practice guidelines for the prevention and management of diabetes in Canada.</i>
Srivastava, Rani H. (Ed.) (2007). <i>The healthcare professional's guide to clinical cultural competence.</i> Elsevier Canada.
Course manuals and coursepack *
<b>HLTH 266</b> Diabetes Management: A Review (manual not required, course delivered online)
<b>HLTH 267</b> Primary Prevention (manual not required, course delivered online)
<b>EDUC 260</b> The Education Process (manual not required, course delivered online)
<b>CLTR 260</b> Cultural Considerations (manual not required, course delivered online)
<b>HLTH 268</b> Insulin and Oral Agents (manual not required, course delivered online)
<b>HLTH 269</b> Nutrition Management (manual not required, course delivered online)
<b>HLTH 273</b> Lab manual
<b>HLTH 270</b> Activity Management course manual
<b>HLTH 271</b> Complications-Acute and Chronic course manual
<b>HLTH 272</b> Diabetes Care Across the Lifespan course manual
<b>CLIN 231</b> Clinical manual

\* For current prices, visit the Regina Campus online bookstore at <http://saskpolytech.ca/student-services/academic/bookstores.aspx>

### **Ordering course material:**

Once you are enrolled in the program and have your Saskatchewan Polytechnic student ID #, you can order course materials online or by phoning the bookstore order processing centre. To order course material before you are enrolled, contact the Regina Campus bookstore in Regina directly.

Online: <http://saskpolytech.ca/student-services/academic/bookstores.aspx>

Bookstore order processing centre: 1-866-569-8398

Regina Campus bookstore: 4500 Wascana Parkway, Regina 775-7755  
or toll free 1-866-467-4278

**\* Call ahead to confirm bookstore hours and to ensure material is available \***

## Appendix C: Assignments

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### Diabetes Education for Health Care Professional program

HLTH 266 – Diabetes Management: A Review **Assignment 1: Evidence Portfolio**

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Mark: \_\_\_\_\_ Pass/Fail

As part of the PLAR assessment for *HLTH 266 – Diabetes Management: A Review*, you are required to submit a portfolio. The PLAR portfolio is an organized documentation of your accomplishments which will show that you can meet the course learning outcomes.

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### Directions

A questionnaire is provided as a format to assist you with documentation of your accomplishments. The information will be applied to the PLAR process for validation of learning outcomes for HLTH 266.

The questionnaire requests documentation about academic preparation, work experience, and industry training related to this course. In some instances, validation will be required such as, but not limited to, submission of letters from employers and copies of certificates, diplomas, or transcripts.

Another section requests a personal narrative. This narrative includes questions which are designed to reflect the course learning outcomes.

### Format for submission

All information should be submitted in the following format:

- Title page (name, date, course, educational institution)
- Questionnaire
- Personal Narrative

### Questionnaire

1. Did you complete any programs, courses, or industry training with outcomes that encompass the learning outcomes of this course? If yes, provide validation for completion of the learning, i.e. copies of certificates or other formal documents.
2. Describe your work experience that encompasses the learning outcomes for this course.
3. What is your experience in diabetes care?

### Personal narrative

1. In your work experience how do you demonstrate understanding of the clinical practice guidelines?
2. How do you use the clinical practice guidelines in your work experience?
3. How do you ensure that diabetes management involves a partnership between the client and health care providers?

## Diabetes Education for Health Care Professional program

HLTH 266 – Diabetes Management: A Review

### Assignment 2: Case Study Assignment, Risk Factors

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Mark: \_\_\_\_\_ Pass/Fail (Pass mark 60%)

Betty is a 47 year old Aboriginal woman who was diagnosed recently with Impaired Glucose Tolerance (IGT) and Hypertension (HTN). She has 5 children, and had gestational diabetes in her last pregnancy. Two of her siblings have Type 2 Diabetes. Betty lives alone, but provides childcare for her grandchildren 5 days a week. She lives a sedentary lifestyle mainly because she has osteoarthritis in her knees

BP – 148/84	<ul style="list-style-type: none"><li>▪ Weight – 80 kg</li><li>▪ Height – 5' 4"</li><li>▪ Waist circumference – 89cm</li></ul>
Lipids: <ul style="list-style-type: none"><li>▪ Triglycerides – 1.83</li><li>▪ Total Cholesterol – 5.90</li><li>▪ HDL – 0.77</li><li>▪ LDL – 3.58</li></ul>	Glucose screening results: <ul style="list-style-type: none"><li>▪ Fasting – 5.9 mmol/L</li><li>▪ 2 hr plasma glucose – 10.8 mmol/L</li></ul>

#### Based on the above information, answer the following questions:

1. Betty was classified with IGT by her physician. Explain why?
2. Identify and discuss Betty's modifiable risk factors.
3. List Betty's non-modifiable risk factors.
4. Which of Betty's risk factors lead you to suspect she has metabolic syndrome? Discuss why.
5. Discuss why it is important for Betty to address her risk factors, particularly those associated with metabolic syndrome? Cite relevant and current evidence to support response.

## HLTH 266: Assignment 2: Case Study Assignment, Risk Factors

### Rubric

**Exemplary:** Assignment goes beyond the requirements, has no errors or omissions. Can be used as an example for others. (90-100%: 22.5-25 marks)

**Excellent:** Assignment meets all requirements with some errors or omissions, and/or may require some elaboration. (74-89%: 18.5-22 marks)

**Satisfactory:** Assignment has many errors or omissions, and/or requires elaboration but meets minimum requirements. (60-74%): 15-18 marks)

**Unacceptable:** Assignment does not meet requirements. (<60%: 0-14 marks)

Marking criteria	Mark	Comments
Report discusses why Betty was diagnosed with IGT, supports response with evidence. (5 marks)		
Report identifies and discusses Betty's modifiable and non-modifiable risk factors for Type 2 Diabetes. (8 marks)		
Report discusses risk factors that are suspect of metabolic syndrome and explains why. (5 marks)		
Report discusses why Betty needs to address her diabetes risk factors, metabolic syndrome risk factors, provides rationale why, and cites relevant and current evidence to support response. (7 marks)		
<b>Total</b>		



## Diabetes Education for Health Care Professional program

HLTH 267 – Primary Prevention

### Assignment 3: Case Study Assignment, Determinants

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Mark: \_\_\_\_\_ Pass/Fail (Pass mark 60%)

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#### Directions:

This assignment has two parts. **Part A** asks you to discuss specific determinants of health as diabetes risk factors that pertain to three clients Debbie, Ben and Robert. **Part B** asks you to provide and discuss primary prevention strategies to address the three clients' health determinants as diabetes risk factors.

#### Part A (10 marks)

- Study case histories for Debbie, Ben and Robert below.
- Identify a minimum of 3 determinants of health as diabetes risk factors for each client.
- Write a paragraph of 200-300 words for each client describing how these determinants of health as diabetes risk factors apply to their specific circumstances.

#### Part B (12 marks)

- Refer to the 3 determinants of health you identified for each client in Part A and provide examples of primary prevention strategies to address each client's issues. You are required to provide a minimum of 4 strategies for each client. Your list of examples for each client must include a strategy from each of the following categories:
  - Build Healthy Public Policy
  - Strengthen Community Action
  - Create Supportive Environments
  - Develop Personal Skills
- Use evidence to support your recommendations.

### **Client #1**

Debbie is a 25 year old Aboriginal woman who lives in a small 2-bedroom urban home. She has many stresses in her life. Debbie is a busy stay-at-home mom of 2-year old twin boys and a 7 month old baby girl. She also has a large extended family and regularly provides child care for her nieces and nephews.

Debbie often skips meals, has little time for exercise and has been unable to lose the weight she gained during her last pregnancy. She has been unemployed for the past year, and to support her family had to apply for financial assistance through social services.

Debbie had gestational diabetes in her last pregnancy and recent lab tests revealed she has prediabetes. She also has several 1st degree relatives living with Type 2 Diabetes.

### **Client #2**

Ben is a healthy 14 year old adolescent boy who lives in a rural community with his parents and two older siblings. He is a computer fanatic and spends most of his free time playing Nintendo games, surfing the net and reading comics - essentially avoiding any type of physical activity.

Ben rarely eats anything green and admits to being a picky eater – he’s a fast food junky and prefers to eat foods high in fat, sugar and salt.

His mom says he has always been a “big child” – his birth weight was 4.3 kg and he remained overweight throughout his preadolescent years. His current BMI is on the verge of being classified as obese at 29.7 kg/m<sup>2</sup>.

Ben’s oldest sister recently developed gestational diabetes and his dad has lived with Type 2 Diabetes since age 39.

### **Client #3**

Robert is a 59 year old Caucasian businessman. He and his wife have 3 adult children with one son still residing at home while he completes his university education. Robert is the Project Manager of a highly competitive organization and is required to travel across the country several times a month.

His work environment is fast-paced, highly demanding and stressful, and to cope, Robert drinks over 8 cups of coffee day and smokes ½ to 1 package of cigarettes a day. He admits that his work commitments often take priority over his own health and family needs. Robert typically consumes two meals a day including lunch at the office and a late dinner at home most nights.

He had a physical health assessment recently (it was 4 years overdue) and just learned he has elevated lipids, a fasting plasma glucose of 6.6 mmol/L and hypertension. Robert also has central obesity and a family history of cardiovascular disease with no known family history of diabetes.

## HLTH 267 – Assignment 3: Case Study Assignment, Determinants

### Rubric

**Exemplary:** Assignment goes beyond the requirements, has no errors or omissions. Can be used as an example for others. (90-100%: 22.5-25 marks)

**Excellent:** Assignment meets all requirements with some errors or omissions, and/or may require some elaboration. (74-89%: 18.5-22 marks)

**Satisfactory:** Assignment has many errors or omissions, and/or requires elaboration but meets minimum requirements. (60-74%): 15-18 marks)

**Unacceptable:** Assignment does not meet requirements. (<60%: 0-14 marks)

Marking criteria	Mark	Comments
<p><b>Part A</b> - Report Identifies a minimum of 3 determinants of health as diabetes risk factors for each client, describes how these health determinants apply to their specific circumstances. (9 marks)</p>		
<p><b>Part B</b> - Report provides examples of primary prevention strategies for each determinant of health identified in Part A, and provides a strategy to address each client's issues from the following list of categories (12 marks):</p> <ul style="list-style-type: none"> <li>▪ Build Healthy Public Policy</li> <li>▪ Strengthen Community Action</li> <li>▪ Create Supportive Environments</li> <li>▪ Develop Personal Skills</li> </ul>		
<p>Report uses 3 current and relevant references with reference page, appropriate spelling and grammar. (4 marks)</p>		
<b>Total</b>		

## Diabetes Education for Health Care Professional program

HLTH 267 – Primary Prevention

### Assignment 4: Risk Factor Awareness Program for Diabetes Prevention

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Mark: \_\_\_\_\_ Pass/Fail (Pass mark 60%)

#### Directions:

Submit an 8-10 page typed double-spaced paper considering implementing a risk factor awareness program for diabetes prevention in your own community. Your paper must include the following components:

1. Discuss ***whether or not*** a community-based diabetes risk awareness program meets the criteria of a disease prevention program in your community by using at least five conditions to justify its implementation (10 marks)
2. Using a midstream approach to population health promotion to raise awareness and an upstream approach involving partners, compare and contrast the ***benefits*** and ***limitations of*** each approach for your proposed community-based diabetes risk awareness program. Cite at least 4 current and relevant references to support ideas. (12 marks)
3. Include an introduction with thesis statement, summary of relevant information about the community including demographics, population, statistics, and closing summary. (4 marks)
4. Include a title page, headings/sub-heading, and a reference page. Ensure correct spelling, punctuation and grammar, and clarity of thought. (4 marks)

#### Use the following conditions/criteria as your reference to justify the initiation of a disease prevention program:

- The disease is an important health problem (e.g. hypertension) in that many people are susceptible.
- Accepted therapy is available.
- Facilities are available for diagnosis and treatment.
- The disease has an asymptomatic (or latent) phase during which detection and treatment decrease morbidity and mortality.
- Treatment in the asymptomatic phase yields a therapeutic result.
- The natural history of the disease is understood.
- The test(s) for the disease is (are) acceptable and available at a reasonable cost.
- An agree-on policy exists regarding who is to be treated.
- The cost of case finding and treatment is less than the cost of the disease is discovered when it becomes symptomatic.

**HLTH 267 – Assignment 4: Risk Factor Awareness Program for Diabetes prevention  
Rubric**

- Exemplary:** Assignment goes beyond the requirements, has no errors or omissions. Can be used as an example for others. (90-100%: 27-30 marks)
- Excellent:** Assignment meets all requirements with some errors or omissions, and/or may require some elaboration. (75-89%: 22.5-26.5 marks)
- Satisfactory:** Assignment has many errors or omissions, and/or requires elaboration but meets minimum requirements. (60-74%): 18-22 marks)
- Unacceptable:** Assignment does not meet requirements. (<60%: 0-17.5 marks)

Marking criteria	Mark	Comments
Report includes an introduction with thesis statement, summary of relevant information about the community including population, demographics, statistics, and a closing summary. (4 marks)		
Report uses at least 5 of the 9 criteria required to justify whether or not the proposed community-based diabetes risk awareness program meets the conditions for implementing a diabetes prevention program. (10 marks)		
Report compares and contrasts, and examines the benefits and limitations of two different types of approaches (i.e. a midstream population health approach and an upstream approach) for implementing the proposed community-based diabetes risk awareness program, and cites at least 4 current and relevant references to support ideas. (12 marks)		

Marking criteria	Mark	Comments
Report includes title page, headings/sub-headings, appropriate grammar, spelling and punctuation, reference page; meets length requirement and ensures clarity of thought. (4 marks)		
<b>Total</b>		

## Diabetes Education for Health Care Professional program

EDUC 260 – The Education Process

### Assignment 5: Interview Assignment

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Mark: \_\_\_\_\_ Pass/Fail (Pass mark 60%)

#### Directions:

Interview an individual with diabetes to identify and assess his/her teaching and learning needs regarding his/her diabetes self-management practices. Throughout the interview process ensure you use effective interpersonal communications, person-first language, plain language if appropriate, and avoid the use of labels and medical jargon.

Using the data collected in your interview, write a 10-15 page double spaced report to summarize this teaching experience. To ensure confidentiality, *do not use names or identifying information*. In your report include each of the following:

- Assessment findings: Describe factors influencing this individual readiness to learn. What is their learning style? What are their expectations? What barriers to learning did you identify? Include, as quotations, some of the individual's key responses obtained through open-ended questioning. **(10 marks)**
- A written plan: Identify and detail the goals, strategies and expected outcomes in the plan. **(10 marks)**
- An evaluation of the teaching and learning plan: Discuss its usefulness to the individual. Identify how learning barriers were overcome and if not, why not? In your time with this individual, explain how you supported self care practices. Will this individual be able to integrate the new learning into their self-care practices? Why or why not? **(10 marks)**
- Your reflections (thoughts and feelings) about the teaching process: What were your challenges and successes? For example, was it challenging using open ended questions, being an active listener, using person first language, assessing the individual's learning readiness or learning style, etc.? Was implementing the plan a challenge? What worked well and what would you do differently next time? **(6 marks)**
- To support your observations and evaluation, cite at least three (3) current and relevant reference sources. Your report must include a title page, headings and sub-headings, and a reference page. Ensure clarity of thought, correct spelling, punctuation and grammar. **(4 marks)**

**A signed consent form must be included with this assignment.  
If a consent form is not included, a grade of 0% will be given.**

To assist you in your data collection and construction of the teaching plan use the following “Client Education Guide” as a guideline.

## Client education guide

### Assessment

1. Assess the client’s readiness for diabetes education.
  - What are the person’s health beliefs and behaviours?
  - What psychosocial adaptation is the person making?
  - Is the person ready to learn?
  - Is the person able to learn these behaviours?
  - What additional information about the person is needed?
  - What are the person’s expectations?
  - What does the person want to learn?
2. Organize, analyse, synthesize, and summarize the collected data.

### Planning and Goals

1. Assign priority to the person’s learning needs.
2. Specify the immediate, intermediate, and long-term teacher/learner established goals.
3. Identify teaching strategies appropriate for goal attainment.
4. Establish expected outcomes.
5. Develop a written plan:
  - Include goals, strategies and expected outcome(s).
  - Put the information to be taught in logical sequence.
  - Write down key points
  - Select the appropriate teaching aides.
  - Keep plan current and flexible to meet person’s changing needs.
  - Involve the person with diabetes, their family and/or support(s), and other health care providers in planning process.

### Implementation

1. Put the plan into action.
2. Use language the person can understand.
3. Use appropriate teaching aides.
4. Use the same equipment the person will use at home.
5. Encourage the person to participate in the learning activity.
6. Provide feedback



## Client education guide

### Evaluation

1. Collect objective data:
  - Observe the person.
  - Ask questions to determine if the person understands.
  - Use rating scales, checklists, and anecdotal notes.
2. Compare the person's behavioural responses with the desired outcomes. Determine the extent to which the goals were achieved.
3. Include the person with diabetes, their family and/or support person(s), and other health care providers in the evaluation process.
4. Identify alterations that need to be made in the teaching plan.
5. Make referrals to appropriate resources or agencies for reinforcement of learning.
6. Continue all steps of the teaching/learning process (i.e. assessment, revising plan, implementation and evaluation).

**EDUC 260 – Assignment 5: Interview Assignment****Rubric**

**Exemplary:** Assignment goes beyond the requirements, has no errors or omissions. Can be used as an example for others. (90-100%: 36-40 marks)

**Excellent:** Assignment meets all requirements with some errors or omissions, and/or may require some elaboration. (75-89%: 30-35 marks)

**Satisfactory:** Assignment has many errors or omissions, and/or requires elaboration but meets minimum requirements. (60-74%): 24-29 marks)

**Unacceptable:** Assignment does not meet requirements. (<60%: 0-23 marks)

Marking criteria	Mark	Comments
Assessment findings include factors influencing readiness to learn, learning style, learner expectations, barriers, authentic quotations. (10 marks)		
Report includes written plan identifying goals, strategies and expected outcomes. (10 marks)		
Evaluation of client learning includes information related to usefulness, barriers and ability to integrate new learning. (10 marks)		
Report includes self-reflection with honest and in depth thoughts and feelings about the teaching experience, including challenges and successes. (6 marks)		

Marking criteria	Mark	Comments
<p>Report includes title page, headings/sub-headings, appropriate grammar, spelling, punctuation, reference page with at least 3 current and relevant references, meets length requirements; ensures confidentiality. (4 marks)</p>		
<p>Report includes a signed consent form. If a consent form is not included, a grade of 0% will be given.</p>		
<b>Total</b>		

## EDUC 260 – Consent form

Before you begin your interview, determine that your client understands the wording of the consent sheet. Have your client sign and date the consent form and attach it to the back of your assignment.

I, *(please print name)* \_\_\_\_\_ give consent for the Saskatchewan Polytechnic Diabetes Education for Health Care Professionals Program student named here *(please print student name)* \_\_\_\_\_ to conduct an interview on me concerning my learning needs about diabetes. I understand that only my initials will be used and that the data I give the above-named student will be written down and submitted to a Saskatchewan Polytechnic Diabetes Education for Health Care Professionals Program faculty member who will read the assignment and assign a mark to the student. I understand that the interview data will be used for educational purposes only.

\_\_\_\_\_  
Signature of client

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of student

\_\_\_\_\_  
Date

## Diabetes Education for Health Care Professional program

CLTR 260 – Cultural Considerations

### Assignment 6: Cultural Competence Assignment

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Mark: \_\_\_\_\_ Pass/Fail (Pass mark 60%)

#### Directions:

Investigate and write a critique on the degree of cultural competence of the diabetes care services available in your own community (e.g., Health Clinic, Diabetes Education Program, Podiatry Clinic) to determine the level to which the service works within the cultural context of individual clients, families or communities from diverse cultural backgrounds.

Your critique will evaluate whether or not the evidence you uncover demonstrates that the diabetes care services provided by individual providers and/or the entire program practices cultural competence in the following ways **(15 marks)**:

1. Cultural appropriateness – Does the program demonstrate cultural awareness and sensitivity to norms, values and beliefs of the person, situation and environment as they pertain to client needs? How is this demonstrated?
2. Cultural knowledge – To what degree does the provider/program seek out and obtain education about various world views of different cultures? Does the service identify the predominant cultural groups in the community and educates themselves about their cultural beliefs, etc?
3. Cultural skill – To what degree of competence does the provider perform a cultural assessments.
4. Cultural negotiation – Does the provider attempt to join Western and non-Western beliefs in a way that enables client achieve healthy outcome? How?
5. Cultural access – Is there a provision of information and services in languages or media that facilitates the education process/delivery of information and care?
6. Values diversity – To what degree does the provider/program demonstrate an acceptance and respect for the cultural diversity of clients?

Based on your evaluation, provide recommendations for strategies or actions the provider/program could implement to enhance their cultural competence. Provide rationale. **(12 marks)**

Include a brief summary of the program's services, and identify the predominant populations in the community that the program provides care and education for. **(8 marks)**

Include a title page, headings/sub-heading, 3 current and relevant sources of evidence and a reference page. Use correct spelling, punctuation and grammar. **(5 marks)**

## CLTR 260 – Assignment 6: Cultural Competence Assignment

### Rubric

**Exemplary:** Assignment goes beyond the requirements, has no errors or omissions. Can be used as an example for others. (90-100%: 36-40 marks)

**Excellent:** Assignment meets all requirements with some errors or omissions, and/or may require some elaboration. (75-89%: 30-35 marks)

**Satisfactory:** Assignment has many errors or omissions, and/or requires elaboration but meets minimum requirements. (60-74%): 24-29 marks)

**Unacceptable:** Assignment does not meet requirements. (<60%: 0-23 marks)

Marking criteria	Mark	Comments
Report evaluates whether or not the individual care providers and/or the entire program critiqued practices cultural competence through cultural appropriateness; cultural knowledge; cultural skill; cultural negotiation; cultural access; and values diversity. (15 marks)		
Report provides strategy and action recommendations the care provider/program could implement to enhance their level cultural competence. (12 marks)		

Marking criteria	Mark	Comments
<p>Report summarizes the program's services, provides demographic information, identifies the program's predominant population it provides services and diabetes education. (8 marks)</p>		
<p>Report includes title page, headings/sub-headings, appropriate grammar, spelling and punctuation, 3 current and relevant sources of evidence, reference page; meets length requirement; ensures clarity of thought. (5 marks)</p>		
<b>Total</b>		

## Diabetes Education for Health Care Professional program

HLTH 269 – Nutrition Management

### Assignment 7: Case Study Assignment

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Mark: \_\_\_\_\_ Pass/Fail (Pass mark 60%)

#### Directions:

Submit the following assignment based on answers to the following series of cases. Submit **no more than two pages per case**, typed, double-spaced report that includes:

- Case 1, (**15 marks**)
- Case 2, (**10 marks**)
- Case 3, (**10 marks**)
- Ensure clarity of thought. Use correct spelling, punctuation and grammar (**5 marks**)



#### Nutrition Review Case 1

Mr. J. J., age 56, has just been diagnosed with diabetes. Mr. J. J. says that he's surprised that he's lasted this long as all his siblings have diabetes. His blood sugar at diagnosis is 15 mmol/L fasting. He has few symptoms – a little tired, a cut on his foot that is not healing. He is 68 inches tall and weighs 254 lbs.

He lives in his home community with his wife, son and daughter-in-law, and three grandchildren. He is not employed.

The doctor has decided to try Mr. J. J. on diet alone for a month, see what happens to his sugars, and then decide about oral medication. Unfortunately the dietician visited the community yesterday and she will not be back for a month. The nutrition education is up to you!

For each of the following scenarios, design a nutrition based education program for Mr. J. J. and his family.

1. Mr. J. J. and his wife are willing to try. Neither can read English and their verbal comprehension is low.
  - List a few key questions you might ask Mr. J. J.
  - What will be your main education strategies?
  - What resources might you use?



2. Mr. J.J. and his wife are willing to try. Both have finished grade 9 and are used to doing some reading. They are already asking a few questions.
  - List a few key questions you might ask Mr. J. J.
  - What will be your main education strategies?
  - What resources might you use?
  
3. Mr. J. J. is a former Health Director in the community. He has finished high school and has taken several courses during his time as HD. He says he knew this was coming and wants to learn as much as he can to get thing under control. He does not want the problems that he's seen with some of his family members. He's asking you what he can read.
  - List a few key questions you might as Mr. J. J.
  - What will be your main education strategies?
  - What resources might you use?



## Nutrition Review Case 2

Everyone in the community knows that you've been taking the Saskatchewan Polytechnic program. They want to have a gathering and ask you questions. You're a little nervous, but agree. A few community members agree to submit their questions in advance – here they are – how will you answer them? Write a **short** paragraph for each one.

1. I don't want to give up bannock. How much should I eat at a meal and how should I make it? (Assume client has 2 starches at a meal).
  
2. I got a box of crackers and it has numbers on the label, but I don't understand it. How many can I eat? (Assume client has 1 starch at snack).
  - **Label Says:** 6 crackers = 17 grams CHO, 4 grams fat, 0.2 grams protein.  
How many sugar cube equivalents would be one serving?
  
3. I heard that people with diabetes can't eat wild meat. Is that true?
  
4. I need to lose weight. What can I do? (Note, only a general answer is expected).



### **Nutrition Review Case 3**

Often client education is best when you have a simple way to explain something or a little game or an analogy to help with understanding. For each of the following principles,

- prepare a simple way to explain this
  - a short game or activity
  - think up an analogy that would be meaningful to your clients or
  - or do all three!
1. Small amounts of concentrated sugars are ok, try to have with a meal.
  2. Eat three meals per day, have 4-6 hours between meals.
  3. Eat smaller meals to lose weight. Avoid excess fat in foods or cooking.
  4. Lose weight to decrease insulin resistance.
  5. Eat at least one food from each of the four food groups at each meal.

## HLTH 269 – Assignment 7: Case Study Assignment

### Rubric

**Exemplary:** Assignment goes beyond the requirements, has no errors or omissions. Can be used as an example for others. (90-100%: 36-40 marks)

**Excellent:** Assignment meets all requirements with some errors or omissions, and/or may require some elaboration. (75-89%: 30-35 marks)

**Satisfactory:** Assignment has many errors or omissions, and/or requires elaboration but meets minimum requirements. (60-74%): 24-29 marks)

**Unacceptable:** Assignment does not meet requirements. (<60%: 0-23 marks)

Marking criteria	Mark	Comments
Case Study 1 – Design of a specific diabetes education program for three different client scenarios. (15 marks)		
Case Study 2 – Report includes 4 written paragraphs of 100-200 words in response to the 4 questions provided. (10 marks)		
Report provides a simple explanation and/or a simple analogy to use when teaching clients about the 5 listed nutrition principles. (10 marks)		
Report uses appropriate grammar, spelling and punctuation, and ensures clarity of thought. (5 marks)		
<b>Total</b>		

## Diabetes Education for Health Care Professional program

HLTH 268 – Insulin and Oral Agents

### Assignment 8: Insulin Therapy Case Study Assignment

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Mark: \_\_\_\_\_ Pass/Fail (Pass mark 60%)

#### Directions:

Using the data provided in the Case Study outlined below, submit a 9 – 12 page, typed, and double-spaced paper that addresses the following components. **Note:** Ensure clarity of thought, correct punctuation and grammar.

1. Discuss why the client needs insulin therapy – provide rationale for your discussion. Support your discussion with data from the client's history, and what is known about the pathophysiology of type 2 diabetes. **(4 marks)**
2. Propose a specific insulin regimen – provide rationale for your recommendations. Include a discussion on how you would assess its effectiveness. **(8 marks)**
3. Discuss the barriers to insulin use – include barriers from both the client's perspective and the health care provider's perspective. Include a detailed discussion on how you would address the barriers. For e.g., rapport building. **(10 marks)**
4. Support your discussions and recommendations with evidence from at least 3 reference sources. Include a title page, headings/sub-heading, and a reference page. **(3 marks)**

#### Case Study

Female client, age 61. Type 2 diabetes for over 12 years. History of hypertension. Family history of type 2 diabetes: grandmother and brother. Retired teacher. Since retiring 2 years ago, has joined a gym and exercises after lunch 3-4 times a week with a friend.

Initially, your client managed her diabetes through healthy eating and regular exercise. Five years after diagnosis, was started on oral anti-hyperglycemic agents (OHGA).

Recent A1C: 8.2% (0.082). Current BP: 136/78. Weight 77 kgms. Height 165 cm.

Current medications include:

- ASA 81 mgm
- Ramipril 10 mgm bid
- Metformin 1 gram bid
- Glyburide 10 mgm bid
- Actos 30 mgm daily

Recent blood glucose readings as follows:

<b>Date or Day</b>	<b>Before breakfast</b>	<b>Before lunch</b>	<b>Before supper</b>	<b>HS (Bedtime)</b>
<b>Monday</b>		7.7	5.2	6.5
<b>Tuesday</b>	8.9		6.5	7.9
<b>Wednesday</b>	8.7	6.7	5.0	7.2
<b>Thursday</b>		5.8	7.7	8.2
<b>Friday</b>	8.8	6.2	5.5	9.0
<b>Saturday</b>	9.2		6.7	7.7
<b>Sunday</b>	9.1	7.8	7.3	

## HLTH 268 – Assignment 8: Insulin Therapy Case Study Assignment

### Rubric

**Exemplary:** Assignment goes beyond the requirements, has no errors or omissions. Can be used as an example for others. (90-100%: 22.5-25 marks)

**Excellent:** Assignment meets all requirements with some errors or omissions, and/or may require some elaboration. (75-89%: 18.5-22 marks)

**Satisfactory:** Assignment has many errors or omissions, and/or requires elaboration but meets minimum requirements. (60-74%): 15-18 marks)

**Unacceptable:** Assignment does not meet requirements. (<60%: 0-14 marks)

Marking criteria	Mark	Comments
Report discusses why insulin therapy is indicated based on relevant client data and supporting evidence about type 2 diabetes pathophysiology. (4 marks)		
Report proposes a specific insulin regimen, provides rationale for recommendations, and includes a discussion on how to assess its effectiveness. (8 marks)		
Report discusses potential barriers to insulin use from client's perspective, the health care provider's perspective, includes a detailed discussion on how to address these barriers. (10 marks)		
Report includes title page, headings/sub-heading, uses 3 or more current and relevant references, and a reference page. (3 marks)		
<b>Total</b>		

## Diabetes Education for Health Care Professional program

HLTH 270 – Activity Management

### Assignment 9: Developing an Activity Plan Case Study Assignment

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Mark: \_\_\_\_\_ Pass/Fail (Pass mark 60%)

#### Directions:

Albert, 52, is obese and currently lives a sedentary lifestyle. He has had type 1 diabetes for 20 years and is seeing you today to discuss strategies to improve his blood glucose control. Albert reveals that his workload and level of stress has dramatically increased lately which he believes has affected his diabetes self-management practices.

Albert has had laser surgery on his right eye twice in the past year for active proliferative retinopathy. A recent visit with his endocrinologist revealed the following:

- HbA1c 9.2%
- BP 148/88
- Weight increased 10 kg over past year
- Total Cholesterol 5.2 mmol/L
- HDL 0.98 mmol/L
- LDL 3.12 mmol/L
- Triglycerides 2.25 mmol/L
- Microalbumin 80 mg/L

Albert reports to you that up until 2 years ago he was quite conscientious about his diabetes management and maintained his blood glucose levels in the optimal range, and now his control has deteriorated even though he has doubled his insulin doses.

He admits to you that his visual changes concern him and he worries about his long-term health. When asked what lifestyle changes he wants to make to improve his blood glucose control, Albert stated: "I want to start exercising – every day if I have to! I want to lose all this weight!"

#### Questions

1. What information will you need to assess prior to developing an activity plan with Albert? Provide rationale. **(10 marks)**
2. Based on what you know about Albert's current state of health, what do you need to focus on when carrying out a pre-exercise evaluation? Provide rationale. **(8 marks)**
3. Design an individualized activity plan for Albert by taking into account the type of activity, the intensity, duration and frequency of sessions required to help him attain his identified goal. Include specific exercise guidelines relevant to Albert's diabetes management needs. **(12 marks)**

Ensure your assignment is typed, double-spaced. Point form may be used.

## HLTH 270 – Assignment 9: Developing an Activity Plan Assignment

### Rubric

**Exemplary:** Assignment goes beyond the requirements, has no errors or omissions. Can be used as an example for others. (90-100%: 27-30 marks)

**Excellent:** Assignment meets all requirements with some errors or omissions, and/or may require some elaboration. (75-89%: 22.5-26.5 marks)

**Satisfactory:** Assignment has many errors or omissions, and/or requires elaboration but meets minimum requirements. (60-74%): 18-22 marks)

**Unacceptable:** Assignment does not meet requirements. (<60%: 0-17.5 marks)

Marking criteria	Mark	Comments
Report reviews Albert's health history date, discusses what needs assessment prior to developing a specific activity plan, provides rationale. (10 marks)		
Report discusses what needs to be focused on when carrying out Albert's pre-exercise evaluation, and provides rationale. (8 marks)		
Report includes a design of an individualized activity plan for Albert to assist him in meeting his goals, including activity type, intensity; frequency and duration of sessions, and specific exercise guidelines relevant to his diabetes management needs. (12 marks)		
<b>Total</b>		



## Diabetes Education for Health Care Professional program

HLTH 271 – Complications: Acute and Chronic

### Assignment 10: Case Studies Assignment

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Mark: \_\_\_\_\_ Pass/Fail (Pass mark 60%)

#### Directions:

#### Case Study 1

Mr. J., aged 65, has Type 2 Diabetes. He was admitted to the hospital following a motor vehicle accident. You are asked to see him to review his diabetes management practices. Throughout the interview with Mr. J., you learn the following information:

- Mr. J. suffered a fractured arm along with several bumps and bruises after driving into a parked vehicle two days ago.
  - Mr. J. describes having had episodes of dizziness and trouble focusing lately.
  - You also learn that he was diagnosed with diabetes a few months ago, at which time his family doctor started him on Glyburide 5 mgm twice daily. Since his mother had diabetes and he was familiar with how diabetes is managed he had cancelled his appointment with the Diabetes Education Centre.
  - Mr. J. takes his diabetes medication faithfully, follows a strict diet and has lost 20 pounds since his diagnosis.
  - A recent random plasma glucose was 5.8 mmol/L and A1C level was 6.1 % (0.061
1. Based on the above information and your knowledge of diabetes management, what factors do you consider contributed to Mr. J.'s hospitalization? **(12 marks)**
  2. What diabetes management recommendations do you need to make? Discuss why. **(8 marks)**

#### Case Study 2

Ms. V., aged 57, an Administrative Assistant, has had diabetes for 6 years. Ms V. is also being treated for hypertension. She is concerned about her risks for diabetes complications and contacted you for diabetes education. You meet with Ms. V. uncover the following information:

- Manages her diabetes by watching her diet.
- For the last several months, Ms. V. has been feeling extremely tired and often experiences shortness of breath on exertion.
- Ms. V. experiences symptoms of tingling and a burning sensation in both legs, mostly at night.
- Ms. V. experienced menopause at age 45.
- She has a family history of Type 2 Diabetes, stroke, and heart disease.

- Ms. V. leads a sedentary lifestyle, is overweight and has smoked 1/2 - 1 package of cigarettes/day for over 20 years.
  - Recent lab test results include an A1C of 9.0% (0.090), FPG 9.8 mmol/L, T.C. 6.50 mmol/L, Trigs 3.20 mmol/L, HDL 0.88 mmol/L, LDL 4.88 mmol/L, A-CRatio 32 mg.
1. Based on the above information and your knowledge of diabetes management, what points do you need to consider when addressing Ms. V.s concerns re: developing diabetes related complications? Discuss why. **(8 marks)**
  2. Develop a management plan highlighting the preventive measures that Ms. V. needs to initiate to address the above concerns. Provide rationale for your recommendations. **(12 marks)**

Please ensure submitted assignment is typed, double-spaced and uses correct spelling.

## HLTH 271 – Assignment 10: Case Studies Assignment

### Rubric

**Exemplary:** Assignment goes beyond the requirements, has no errors or omissions. Can be used as an example for others. (90-100%: 36-40 marks)

**Excellent:** Assignment meets all requirements with some errors or omissions, and/or may require some elaboration. (75-89%: 30-35 marks)

**Satisfactory:** Assignment has many errors or omissions, and/or requires elaboration but meets minimum requirements. (60-74%): 24-29 marks)

**Unacceptable:** Assignment does not meet requirements. (<60%: 0-23 marks)

Marking criteria	Mark	Comments
Case Study 1 – Report assesses and addresses factors that contributed to Mr. J.'s hospitalization. (12 marks)		
Case Study 1 – Report provides recommendations to address Mr. J.s needs with rationale. (8 marks)		
Case Study 2 - Report discusses factors that need to be considered when addressing Ms. V's concerns about developing diabetes-related complications. (8 marks).		
Case Study 2 - Report describes a management plan, recommends preventative measures to address Ms. V's concerns about diabetes related complications, and provides rationale. (12 marks)		
<b>Total</b>		

## Diabetes Education for Health Care Professional program

HLTH 272 – Diabetes Care Across the Lifespan

### Assignment 11: Living with Diabetes Assignment

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Mark: \_\_\_\_\_ Pass/Fail (Pass mark 60%)

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#### Directions:

1. Compare and contrast the experience of an adult female living with diabetes and the experience of an adult male living with diabetes. The paper must consider and include discussions on the physical, emotional and psychosocial aspects as well as quality of life issues adult females and males (and their supports) may experience. **(15 marks)**
2. Use at least 3 evidence-based references to support your discussions. **(6 marks)**
3. Your paper must be 5-8 pages in length, typed and double-spaced. Include a title page, headings/sub-headings and reference page. Ensure correct spelling, punctuation and grammar. **(4 marks)**

## HLTH 272 – Assignment 10: Living with Diabetes Assignment

### Rubric

**Exemplary:** Assignment goes beyond the requirements, has no errors or omissions. Can be used as an example for others. (90-100%: 22.5-25 marks)

**Excellent:** Assignment meets all requirements with some errors or omissions, and/or may require some elaboration. (74-89%: 18.5-22 marks)

**Satisfactory:** Assignment has many errors or omissions, and/or requires elaboration but meets minimum requirements. (60-74%): 15-18 marks)

**Unacceptable:** Assignment does not meet requirements. (<60%: 0-14 marks)

Marking criteria	Mark	Comments
Report compares and contrasts the experience of an adult female living with diabetes and the experience of an adult male living with diabetes, includes discussions on the physical, emotional, psychosocial aspects and quality of life issues adult females, males and their supports may experience. (15 marks)		
Report uses 3 evidence-based references to support discussions, includes reference page. (6 marks).		
Report includes a title page, headings/sub-headings, uses appropriate grammar, spelling and punctuation, ensures clarity of thought and meets length requirement. (4 marks)		
<b>Total</b>		

## Diabetes Education for Health Care Professional program

HLTH 273 – Lab Component

### Assignment 12: Motivational Interviewing Assignment

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Mark: \_\_\_\_\_ Pass/Fail (Pass mark 60%)

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#### Directions:

1. Identify and briefly explain motivational interviewing techniques that can be used in diabetes prevention. **(10 marks)**
2. Choose a client at risk for developing diabetes to interview and prepare an audio tape presentation on the use of the techniques identified in #1. The tape must be a minimum of 10 minutes. **(15 marks)**
3. Include a title page, headings/sub-headings, and a reference page. Use correct spelling, punctuation and grammar. **(5 marks)**

A signed consent form must accompany this assignment.  
If a signed consent form is not included a grade of 0% will be given.

## HLTH 273 – Assignment 12: Motivational Interviewing Assignment

### Rubric

**Exemplary:** Assignment goes beyond the requirements, has no errors or omissions. Can be used as an example for others. (90-100%: 27-30 marks)

**Excellent:** Assignment meets all requirements with some errors or omissions, and/or may require some elaboration. (75-89%: 22.5-26.5 marks)

**Satisfactory:** Assignment has many errors or omissions, and/or requires elaboration but meets minimum requirements. (60-74%): 18-22 marks)

**Unacceptable:** Assignment does not meet requirements. (<60%: 0-17.5 marks)

Marking criteria	Mark	Comments
Report identifies and explains motivational interviewing techniques. (10 marks)		
Audio tape submission demonstrates well prepared interview and effective use of motivational outlined in step #1, meets length requirement. (15 marks)		
Report includes a title page, headings/sub-headings, uses appropriate grammar, spelling and punctuation, and a reference page. (5 marks)		
Report includes a signed consent form. If a consent form is not included, a grade of 0% will be given		
<b>Total</b>		

## HLTH 273 – Consent form

Before you begin your interview, determine that your client understands the wording of the consent sheet. Have your client sign and date the consent form and attach it to the back of your assignment.

I, *(please print name)* \_\_\_\_\_ give consent for the Saskatchewan Polytechnic Diabetes Education for Health Care Professionals Program student named here *(please print student name)* \_\_\_\_\_ to conduct an interview on me concerning my learning needs about diabetes. I understand that only my initials will be used and that the data I give the above-named student will be written down and submitted to a Saskatchewan Polytechnic Diabetes Education for Health Care Professionals Program faculty member who will read the assignment and assign a mark to the student. I understand that the interview data will be used for educational purposes only.

\_\_\_\_\_  
Signature of client

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of student

\_\_\_\_\_  
Date



## Diabetes Education for Health Care Professional program

HLTH 273 – Lab Component

### Assignment 13: Foot at Risk Assignment

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Mark: \_\_\_\_\_ Pass/Fail (Pass mark 60%)

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#### Directions:

1. Identify signs and symptoms which would typify the foot at risk. Explain the pathophysiology associated with each. **(10 marks)**
2. Identify and explain the tools used to screen for PVD and alterations in sensation. **(10 marks)**
3. Explain the steps utilized in a foot assessment. **(8 marks)**
4. Include a title page, headings/sub-heading, and a reference page. Use correct spelling, punctuation and grammar. **(4 marks)**

## HLTH 273 – Assignment 13: Foot at Risk Assignment

### Rubric

**Exemplary:** Assignment goes beyond the requirements, has no errors or omissions. Can be used as an example for others. (90-100%: 27-30 marks)

**Excellent:** Assignment meets all requirements with some errors or omissions, and/or may require some elaboration. (75-89%: 22.5-26.5 marks)

**Satisfactory:** Assignment has many errors or omissions, and/or requires elaboration but meets minimum requirements. (60-74%): 18-22 marks)

**Unacceptable:** Assignment does not meet requirements. (<60%: 0-17.5 marks)

Marking criteria	Mark	Comments
Report identifies signs and symptoms that typify the foot at risk, explains the pathophysiology associated with each sign and symptom. (8 marks)		
Report identifies and describes the screening tools used to screen for PVD and alterations in sensation. (10 marks)		
Report explains the steps utilized in a foot assessment. (8 marks)		
Report includes title page, headings/sub-heading, and reference page, uses correct spelling, punctuation and grammar, and ensures clarity of thought. (4 marks)		
<b>Total</b>		

## Diabetes Education for Health Care Professional program

HLTH 273 – Lab Component

### Assignment 14: Video Tape Foot Assessment

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Mark: \_\_\_\_\_ Pass/Fail (Pass mark 60%)

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#### Directions:

1. Select a client with diabetes on whom to perform a foot assessment.
2. Obtain a signed consent from the client allowing you to perform the foot assessment and to videotape the assessment. This consent form must accompany the submitted videotape or a grade of 0% will be given. A clear explanation of the procedure to the client must be included and evident in your introduction. **(5 marks)**
3. The assessment must be accurate and clearly demonstrated on the videotape. An oral explanation must be ongoing and audible throughout the taped assessment. **(25 marks)**

## HLTH 273 – Assignment 14: Video Tape Foot Assessment

### Rubric

- Exemplary:** Assignment goes beyond the requirements, has no errors or omissions. Can be used as an example for others. (90-100%: 27-30 marks)
- Excellent:** Assignment meets all requirements with some errors or omissions, and/or may require some elaboration. (75-89%: 22.5-26.5 marks)
- Satisfactory:** Assignment has many errors or omissions, and/or requires elaboration but meets minimum requirements. (60-74%): 18-22 marks)
- Unacceptable:** Assignment does not meet requirements. (<60%: 0-17.5 marks)

Marking criteria	Mark	Comments
Videotape demonstrating performance of foot assessment, clear explanation of the procedure to client, written consent from the client (5 marks)		
Videotape demonstrates accurate foot assessment, ongoing clear and audible explanations to client. (25 marks)		
Report includes a signed consent form. If a consent form is not included, a grade of 0% will be given		
<b>Total</b>		

## Appendix D: Clinical evaluation guidelines

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### Diabetes Education for Health Care Professionals CLIN 231 – Evaluation guidelines

On *(date)* \_\_\_\_\_, PLAR candidate's name \_\_\_\_\_ met  
all the clinical objectives of the Diabetes Education for Health Care Professionals program.

Dates of clinical experience: _____ _____
Total number of 6 hour shifts: _____
Total number of 8 hour shifts: _____
Agency/Unit: _____

#### Clinical learning outcomes

1. Demonstrate knowledge-based practice in the area of health promotion and the primary prevention of diabetes.
2. Demonstrate knowledge-based practice in the area of diabetes education, care and management.
3. Apply principles of adult learning in client health teaching.
4. Assess, develop and implement teaching plan for clients with diabetes in conjunction with other health care providers
5. Participate in evaluation and modification of clients' diabetes management plan.
6. Perform assessments, treatments and procedures in collaboration with client, family and other Health Care Team members in a safe and caring manner.
7. Communicate effectively with clients/family/support person(s) and members of Health Care Team.
8. Demonstrate respect for cultural differences, traditions and health care beliefs.
9. Practice within the parameters of the clinical agency's policies, philosophy and procedures.
10. Keep current with new knowledge and skills.

Comments:

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Student signature: \_\_\_\_\_

Preceptor's signature: \_\_\_\_\_

Hospital education contact: \_\_\_\_\_

**For Wascana Campus only**

Program faculty: \_\_\_\_\_



**Diabetes Education for Health Care Professionals**  
**CLIN 231 –Performance rating guidelines – scoring guide**

1. This rating indicates that the experience has been unavailable or unobserved.
2. This rating indicates that the student is not performing at the expected level after appropriate practice.
3. This rating indicates that the student is demonstrating growth but needs more experience to perform at the expected level.
4. This rating indicates that the student is consistently performing at the expected level of performance.
5. This rating indicates that the student consistently exceeds the expected level of performance.

**When objectives are rated at the "2" level, specific comments must be documented.**  
**Students have passed when all objectives are rated at the "4" level.**

**Clinical learning outcome 1: Demonstrate knowledge-based practice in the area of health promotion and the primary prevention of diabetes.**

Criteria	1	2	3	4	5
1. Discusses the role of health promotion in primary prevention of diabetes.					
2. Promotes healthy lifestyle.					
3. Discusses the role of evidence-based decision making in diabetes prevention.					
4. Recognizes the role of community risk evaluation programs in the primary prevention of diabetes.					
5. Demonstrates an awareness of community development in health promotion and diabetes prevention.					
6. Uses appropriate resources/strategies (literature, community, significant others, peers, health care team) to promote healthy living.					

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Clinical learning outcome 2: Demonstrate knowledge-based practice in the area of diabetes education, care and management.**

Criteria	1	2	3	4	5
1. Demonstrates knowledge of normal metabolism, insulin function and the pathophysiology of diabetes.					
2. Outlines diabetes diagnostic criteria.					
3. Teaches about diabetes management.					
4. Performs assessment of client(s) diabetes care needs using direct observation, purposeful interviewing and appropriate technical skills.					
5. Discusses the role of evidence-based decision making in diabetes management.					
6. Recognizes the role of individualized diabetes management plan.					
7. Demonstrates awareness of how health status influences diabetes care and management needs.					
8. Adapts teaching/learning plan to meet needs of client and family/support person(s).					

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



**Clinical learning outcome 3: Apply principles of adult learning in client diabetes education.**

Criteria	1	2	3	4	5
1. Uses principles of adult learning in client health teaching.					
2. Utilizes a variety of strategies to enhance client diabetes education.					
3. Recognizes factors that influence clients' readiness to learn.					
4. Demonstrates awareness of the Stages of Behaviour Change Model and its role in diabetes care/prevention.					
5. Uses variety of educational mediums when presenting to groups.					

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Clinical learning outcome 4: Assess, develop and implement teaching plan for clients with diabetes in conjunction with other health care providers.**

Criteria	1	2	3	4	5
1. Incorporates the four elements of assessment, planning, implementation and evaluation in the education process.					
2. Collaborates with the client, family/support person(s) and other health care providers to develop the clients' teaching/learning plan.					
3. Individualizes teaching plan to meet clients' needs, preferences and learning styles.					
4. Reinforces teaching/learning plan of other health care providers.					
5. Implements teaching to meet learning needs of client and family/support person(s).					
6. Utilizes a variety of strategies to enhance client teaching.					

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Clinical learning outcome 5: Participate in evaluation and modification of clients' diabetes management plan.**

Criteria	1	2	3	4	5
1. Collaborates with other health care providers in evaluating the clients' diabetes management plan.					
2. Modifies the clients' diabetes management plan in conjunction with other health care providers.					

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

**Clinical learning outcome 6: Perform assessments, treatments and procedures in collaboration with client, family and other health care members in a safe and caring manner.**

Criteria	1	2	3	4	5
1. Carries out assessments, treatments and procedures consistent with course theory, established goals and agency policy.					
2. Provides sound rationale for actions and/or teachings/reinforcement of teachings.					
3. Implements and/or adapts actions safely according to changes in client's health status.					
4. Collaborates with other health care providers.					

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Clinical learning outcome 7: Communicate effectively with clients, family/support person(s) and members of Health Care Team.**

Criteria	1	2	3	4	5
1. Interacts appropriately with client(s), family/support person(s) and members of Health Care Team by: a) active listening, b)attending behaviour, c) showing empathy, respect and genuineness, d) being tactful, considerate and courteous.					
2. Provides accurate explanations and clear directions for the client and their family/support person(s).					
3. Reports pertinent information accurately and effectively about clients' diabetes care needs/health statue to preceptor/instructor and/or the appropriate Health Care Team member.					

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Clinical learning outcome 8: Demonstrate respect for cultural differences, traditions and health care beliefs.**

Criteria	1	2	3	4	5
1. Demonstrates awareness of cultural differences and health beliefs in diabetes self-management.					
2. Demonstrates respect for cultural differences and health beliefs.					
3. Uses culturally appropriate tools/resources when working with clients and/or when presenting to groups.					
4. Individualizes teaching plan to accommodate clients' cultural beliefs and traditions.					

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Clinical learning outcome 9: Practice with the parameters of the clinical agency's policies, philosophy and procedures.**

Criteria	1	2	3	4	5
1. Adheres to established agency policies, schedules and routines.					
2. Complies with institutional practices.					
3. Demonstrates professional behaviour.					

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Clinical learning outcome 10: Keep current with new knowledge and skills.**

Criteria	1	2	3	4	5
1. Formulates a learning contract including goals, learning resources and strategies, evidence of accomplishment and criteria for evaluating evidence.					
2. Reviews learning contract with clinical preceptor/instructor to ensure successful attainment of clinical learning goals.					
3. Completes learning contract during clinical experience.					
4. Prepares for clinical experience by reviewing course materials and appropriate materials.					
5. Takes initiative in seeking out learning experiences.					
6. Takes initiative in seeking clarification or guidance.					
7. Adheres to policies and procedures of Saskatchewan Polytechnic.					

Comments: \_\_\_\_\_

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\_\_\_\_\_

\_\_\_\_\_