



# National Certification Board for Diabetes Educators

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## Diabetes Educator Mentorship Program

### **Mentor Application Packet**

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*People come in and go out of our lives all the time. Some of these relationships help us grow, and through them, we learn personal and professional lessons of life. Special relationships provide a catalyst for our transformation as individuals and help us grow, open windows to new capabilities, and create new ways of interacting with the world around us. These relationships constitute the reciprocal, interactive process of learning that connects us so we can reach our goals and grow together.\**

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\*Allen, S.L. (2002). "Mentoring – The essential connection." AORN Journal. 75 (3): 440.

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## Introduction

Thank you for your interest in learning more about the Diabetes Educator Mentorship Program (Program), a program developed by a coalition of organizations. The organizations -- The National Certification Board for Diabetes Educators (NCBDE), the American Association of Diabetes Educators (AADE) and the American Diabetes Association (ADA) have created the program to promote careers that will lead to a Certified Diabetes Educator® (CDE®) designation and improve access to much needed diabetes self-management education (DSME).

The Program will partner experienced CDE®-credentialed diabetes educators with healthcare professionals who are interested in gaining experience in providing diabetes self-management education. The goal is to assist these professionals with meeting the current hours of experience practice requirement for CDE® certification.

“There are more than 23\* million people in the United States who have diabetes. The national price tag for diabetes is at an astounding \$174 billion per year and that cost is estimated to almost triple in the next 25 years. Factoring in the additional costs of undiagnosed diabetes, pre-diabetes, and gestational diabetes brings the total cost of diabetes to \$218 billion.” said David Randal, PsyD, LP, CDE®, 2010 NCBDE Board of Directors Chair. “By 2025, it is estimated that more than 40 million will have the disease. To help people with diabetes maintain and improve the quality of their lives, it is critical that we dramatically increase the number of qualified healthcare professionals who provide diabetes self-management education.”\*\*

“We are pleased to be part of this mentorship program because it seeks to promote careers in diabetes education,” said Deborah Fillman, MS, RD, LD, CDE®, 2010 AADE President. “Diabetes education is the key to helping patients successfully manage their diabetes, prevent and manage complications, and maintain optimum health.”\*

“Diabetes is a growing epidemic and is taking a devastating physical, emotional and financial toll on our country. With recently released research from the Centers for Disease Control and Prevention estimating one in three Americans will have diabetes by the year 2050, we must continue to ensure that there will be enough, qualified health care professionals to successfully help patients manage their diabetes,” said Christine T. Tobin, RN, CDE®, 2010 President Health Care & Education, American Diabetes Association. “This new mentorship program will work to increase the number of Certified Diabetes Educators available to people with diabetes and ensure they have access to life-saving diabetes self-management education.”\*

The Program will be administered by the NCBDE.

\*Per the Centers for Disease Control and Prevention 2011 National Diabetes Fact Sheet, the number is now estimated to be 25.8 million people (February 2, 2011) - <http://www.cdc.gov/diabetes/pubs/estimates11.htm#1>.

\*\* Reference: New Mentorship Program to Increase Number of Certified Diabetes Educators; Improve Access to Diabetes Self-Management Education, news release “dated November 2010.

## **Program Criteria**

### ***Mentor Eligibility Criteria***

- CDE®, in good standing, for 3 years
- Current practice as a Diabetes Educator, providing DSME services
- Other preceptor/mentoring experience
- Practice accredited by Centers for Medicare and Medicaid Services (CMS), e.g., ADA recognition, AADE accreditation, or other program that can demonstrate compliance with national standards\*
- Agree to complete and submit appropriate Mentor/Mentee monitoring documentation

\*Applicants in practices that are not recognized by ADA or accredited by AADE must complete the National Standards form (verifying adherence to national standards) included in this packet. Additional information may be required if the application is chosen for audit. Random audits will be conducted on a regular basis. In addition, applications can be audited for any reason. If an application is chosen for audit, the practice's diabetes education curriculum and either an annual report or continuous quality improvement report will be required to determine compliance with national standards.

### ***Mentee Eligibility Criteria***

- Meet NCBDE discipline requirements in effect at the time of application
- Volunteer hours must be accrued within a maximum 4 year period immediately prior to applying for certification
- Provide DSME volunteer hours under guidance of NCBDE Mentor
- Accumulate a maximum of 400 volunteer hours of the total 1000 hrs of DSME experience
- Hours provided in practice accredited by Centers for Medicare and Medicaid Services (CMS), e.g., ADA recognition, AADE accreditation, or other program that can demonstrate compliance with national standards

## **What is Mentoring?**

Terms utilized when discussing mentoring:

- Mentor / Mentee refers to the individuals involved
- Mentoring / Mentorship refers to the actual process

Considerable debate surrounds the concept of mentoring and the term mentor has been associated with related terms such as counselor, advisor, assessor and supervisor. Mentoring is more than a professional association and should also include developing a personal rapport with your mentee.

One usually charts unfamiliar territory when attempting to define "mentoring." Mentoring is not a term that is easy to define because it is an ever-changing process. The mentoring process links an experienced person (mentor) with a less experienced person (mentee) to help foster the career development and professional growth of the mentee.

The mentoring process requires that the mentor and mentee work together to reach specific goals and to provide each other with sufficient feedback to ensure that the goals are reached. Mentoring can be described as a process by which you open a passageway to knowledge by sharing ideas and information.

## *What is a Mentor?*

**Many define a mentor as a teacher who assigns tasks and reviews performance, but a mentor is more than a teacher. A mentor facilitates personal and professional growth in an individual by sharing the knowledge and insights that have been learned through the years. The desire to want to share these "life experiences" is characteristic of a successful mentor.**

### **Some Characteristics of a Successful Mentor**

- Wants to mentor another individual and is committed to the mentee's growth and development.
- Maintains current, up-to-date knowledge and the skills necessary to effectively perform as a mentor of an individual interested in becoming a Certified Diabetes Educator®.
- Familiar with the organization's norms and culture. Can articulate and teach the culture.
- Has the time and mental energy to devote to the relationship.
- Demonstrates honesty, integrity, and both respect for and responsibility for stewardship.
- Demonstrates effective communication skills both verbally and nonverbally.
- Willing to help develop the mentee through guidance, feedback, and occasionally, an insistence on a particular level of performance or appropriate direction.
- Initiates new ideas and fosters the mentee's willingness and ability to make changes in his or her performance based on the constant change occurring in the health care environment.
- Has enough emotional intelligence to be aware of their personal emotions and is sensitive to the emotions and feelings of their mentee.
- Is an individual who would be rated as "highly successful" in both their role and in navigating the organization's culture by coworkers and supervisors.
- Demonstrates success in establishing and maintaining professional networks and relationships, both online and offline.
- Willing to communicate failures as well as successes to the mentee.
- Able to spend an appropriate amount of time with the mentee.
- Open to spending time with diverse individuals who may not share a common background.
- Able to say when the relationship is not working and back away appropriately without regard to ego issues or the need to assign blame about the situation.

### ***Mentor's Responsibilities***

**Relationship** – It is highly recommended that a Mentor plan to work with only one mentee at a time. Maintaining a 1:1 mentoring partnership will help ensure the quality of the experience for the mentee and prevent an overload situation for the Mentor.

**Orientation** – Each mentee must be provided with an orientation to the diabetes program and, depending upon the size of the organization, a separate orientation for the facility may be required.

**Learning Process** - Coordinate and structure the learning process to provide experience in diabetes education according to the DSME definition and standards. This will likely involve developing an Individual Development Plan (IDP). This document is developed by the mentee with the assistance of the mentor. The mentoring pair should identify strengths, developmental needs, activities, and track the mentees' progress throughout the mentoring relationship. NCBDE hopes that the IDP will be developed in conjunction with the current Examination Content Outline (Outline). Assessing the mentee's areas of strength and weakness in relation to the Outline will help the IDP reflect the priorities needed to provide the mentee with applicable experience. The goal is to address as many areas of the Outline as possible during a mentee's time working under the Mentor. The mentoring pair should review the IDP periodically and continue to work through stated objectives, making changes as needed.

**Resources:** Provide appropriate resources to facilitate learning, professional growth and role socialization.

**Feedback:** Provide periodic performance feedback (progress reports) to the candidate.

**Documentation:** Complete and return Program reports and surveys to NCBDE as required.

## ***Documentation***

**Mentoring Progress Report** - In order to ensure effective mentor/mentee relationships, NCBDE will monitor the progress of the mentoring pairs and will gather feedback about the program from participants. The goal is to ensure that the relationship is mutually beneficial and to detect potential issues as early as possible. The timing of these reports is still being determined, but attempts will be made to minimize the time needed to submit reports.

**Partnership Completion Survey** - To evaluate the Program's overall effectiveness, participants will be asked to assess the program once a mentee has achieved the 400 hours providing diabetes education. This completion survey will help to determine if the partnership was successful. Evaluation is important in measuring the mentoring relationship's success, as well as the overall Program's success. NCBDE staff will provide the survey after completion of a mentorship partnership.

## **What are the benefits of becoming a Mentor in NCBDE's Program?**

### **For the Mentor**

- Formal recognition of your status as a Mentor by NCBDE (e.g., certificate and identification on NCBDE web site)
- Provides an opportunity for professional development
- Provides an avenue to build relationships and network with other diabetes educators and other health care professionals caring for individuals with diabetes
- Encourages you to maintain an up to date knowledge level and to keep your skills sharp
- Provides possible employment opportunities by expanding your skills and experiences
- May improve your retention rate for those mentees who are hired to serve as diabetes educators
- May improve your ability to recruit highly motivated individuals to your practice/organization
- May increase the amount of successful cross-training in your program
- Possible future recognition of your program by accrediting bodies as being a program where CDEs are "made" (in development at this time)
- Successful mentees who become CDEs will increase access to diabetes education (both in terms of numbers and quality of education provided)
- Additional benefits will be considered and developed by NCBDE, as feasible.

### **For the Mentor's Organization**

- Provides recognition/visibility of their mentor employee and the program
- Possible extension of the amount of diabetes education that can be provided without the full cost of additional staff
- Provides a recruitment advantage, by allowing exposure to a mentee's fit within the organization prior to any consideration of employment.
- Ensures the employee serving as a Mentor maintains an up to date knowledge and skill level.
- Additional benefits may evolve, including possible development by the American Association of Diabetes Educators and American Diabetes Association, NCBDE's partners in creating the mentorship program, of on-line continuing education courses that would revolve around mentoring and that might be provided for those serving as mentors at no fee.

## **Final Comment**

We appreciate your interest in the possibility of serving as a Mentor in the Program. If after reviewing the information in this packet, you wish to pursue participation, please discuss the Program with your supervisor and any other individuals at your organization that need to be aware of your intentions to apply for service as a Mentor to ensure the organization's permission to serve in this role if assigned a mentee. Once you know that you will be able to serve as a Mentor and bring an individual into the organization in a volunteer capacity, please complete and submit the application.

If after reviewing the packet, you feel now is not the right time for you to apply/serve as a Mentor, we hope you will consider spreading the word to other CDEs in your area about the Program.

## **Acknowledgments**

The information used in creation of this packet was derived from numerous sources including the Department of Health and Human Services Mentoring Program, Blood Matters Breakthrough Collaborative Mentor Information Packet, USDOT Mentor Handbook, and various web resources including about.com.





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## Mentor Application

Thank you for considering serving as a mentor in the Diabetes Educator Mentorship Program. Please complete the application and submit it to the NCBDE national office (contact information above).

First Name	Middle Initial	Last Name
Credentials/Discipline (e.g., RN, RD, etc.)		
Institution/Practice Site Name		
Site Address 1		
Site Address 2		
City, State, Zip		
Mailing Address ( <i>only if different from above</i> )		
City, State, Zip		
Daytime phone (w/ area code)    Alternative phone (w/ area code)- <i>circle</i> → <i>mobile</i> <i>home</i> <i>other</i>		
Fax (w/ area code)		Email address* ( <i>required</i> )
<small>*Please be sure to add @ncbde.org to your safe senders list to ensure receiving communications from NCBDE.</small>		
CDE <sup>®</sup> certificate number (8 digits)	Initial Certification Date (mm/dd/yyyy)	Expiration Date (mm/dd/yyyy)

*Please continue to page 2...*

**Mentor Criteria** (all must be met at the time of application) – please review the criteria and provide your initials verifying the requirement has been met.

Initials	Criteria
	I am currently a CDE®.
	I have held the CDE® credential for at least 3 years.
	I currently practice as a diabetes educator and provide diabetes self-management education (DSME) services.
_____	I have other mentoring/preceptor experience. Please provide a description of this experience, including dates. <i>Provide information on separate sheet of paper if additional space is needed.</i>
_____ Yes*  _____ No**	My practice currently is accredited in good standing by the Centers for Medicare and Medicaid Services, e.g., American Diabetes Association’s recognition program or American Association of Diabetes Educators accreditation.  *For those answering “yes” to the above statement, please identify the accrediting organization in the space below <b>and</b> the date of accreditation.  **For those answering “no” to the above statement, I verify that my practice/organization provides DSME in compliance with national standards. You will need to complete and submit the National Standards Verification Form and may be subject to an audit requiring additional materials.
	I agree to complete and submit appropriate mentor/mentee monitoring documentation by the identified deadlines.
	I agree that NCBDE may rely on the accuracy of the representations made herein. I agree that NCBDE shall not be responsible for my actions or inactions and/or for the actions or inactions of my organization and/or the mentee. My organization and I are responsible for verifying the credentials/licensure requirements of any mentee. NCBDE is not responsible for verifying the credentials/licensure requirements of any mentee.

I have reviewed the Mentor Application packet, understand the requirements, and attest that our practice/organization has approved the Applicant’s participation as a Mentor in the Diabetes Educator Mentorship Program.

Supervisor’s Signature \_\_\_\_\_ Date \_\_\_\_\_  
(must be original)

Print Name \_\_\_\_\_ Title \_\_\_\_\_

Applicant’s Signature \_\_\_\_\_ Date \_\_\_\_\_



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## National Standards Verification Form

To be completed by any CDE® applicant who has responded “No” to item 5 on the Mentor Application form, page 2, i.e., does not currently practice in a program accredited in good standing by the Centers for Medicare and Medicaid Services, e.g., American Diabetes Association’s recognition program or American Association of Diabetes Educators accreditation.

Please review the following standards for diabetes self management education and provide your initials verifying the standards are followed in conducting education in your program.

Initials	Standards Review
	Your program assesses the needs of the community it serves regularly (at least annually) and designs or make changes to the education program based on the assessed needs of the community.
	There is a designated person(s) responsible for coordinating the activities of the diabetes education program, including the education process, staff development and program evaluation.
	The instructors in your program are required to be specialists in diabetes education (through certification or required continuing education)
	The instruction in your program is guided by a curriculum that includes appropriate diabetes content areas, participant learning objectives, methods of instruction delivery and methods for participant learning evaluation.
	The education process includes participant learning needs assessment, education planning, education intervention, goal-setting, goal achievement evaluation and other learning evaluation.
	The education process documents and communicates to other healthcare professionals involved with the diabetes management and general care of the participant.
	There is an established process for evaluating the education program’s effectiveness through participant outcome or program outcome analysis. The results are used to improve the program as needed.

I have reviewed the standards above and verify that our practice/organization meets these standards and additional information may be required if the application is chosen for audit. I understand that random audits will be conducted on a regular basis and that applications can be audited for any reason. I also understand that if my application is chosen for audit, my practice’s diabetes education curriculum and either an annual report or continuous quality improvement report will be needed in order for a review related to compliance with national standards.

Applicant’s Signature \_\_\_\_\_ Date \_\_\_\_\_