

| <b>SUMMARY OF STANDARDS AND REQUIREMENTS</b>   |  |                  |
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| <b>CERTIFIED INDIGENOUS DIABETES PROGRAM KNOWLEDGE SERVICES COORDINATOR Level III (CIDP-KSC III)</b>   |  |                  |
| The standards and requirements of this specialized Level III Diabetes Program Knowledge Services Coordinator certification reflect the qualifications and competencies required for this position and/or for the position of a Diabetes Program Knowledge Manager. |  |                  |
| <b>Education</b>   | <b>Completion of a graduate degree in a human or other social services program, with integrated or additional formal or informal training/education in diabetes, OR a portfolio of training (formal or informal) and length of experience that reflect the requirements of this certification.</b>   |                  |
| <b>Experience</b>  | 6 years (12 000 hours) of work experience, with a minimum of 5 years in a remunerated permanent position in an Indigenous diabetes program or service and additional years of experience accumulated through a combination of permanent or contractual positions that provided support to Indigenous and non- indigenous individuals, families and communities affected with diabetes. | <b>6 years</b>   |
| <b>Education - Training</b><br><br><b>Minimum 980 hours</b>  | <b>Core Knowledge and Skills in Diabetes</b>   | <b>450 hours</b> |
|  | Anatomy and physiological systems linked to diabetes   | 40               |
|  | Pathophysiology  | 40               |
|  | Pharmacological aspects of diabetes  | 40               |
|  | Epidemiology of diabetes among Indigenous communities in Canada  | 40               |
|  | Lifespan and gender issues related to diabetes   | 40               |
|  | Psychosocial impact of diabetes on individuals, families and communities   | 40               |
|  | Foot care issues   | 40               |
|  | Diabetes self-management and care  | 40               |
|  | Health promotion & diabetes prevention   | 40               |
|  | Current models in diabetes care  | 40               |
|  | Healthy Lifestyle approaches to diabetes (Indigenous lens)   | 50               |
|  | <b>Related knowledge and skills (list on page 2)</b>   | <b>50 hours</b>  |
|  | <b>General knowledge/skills in support of professional practice</b>  | <b>180 hours</b> |
|  | <b>Knowledge in the 9 core functions of a CID-KPC – Level III</b>  | <b>220 hours</b> |
| <b>Cultural knowledge and skills</b>   | <b>80 hours</b>  |                  |
| <b>Supervisor's Evaluation</b><br><br><b>minimum score</b>   | <ul style="list-style-type: none"> <li>• Core knowledge in diabetes</li> <li>• General Knowledge</li> <li>• Knowledge and skills in the 9 Core Functions of a CID-KPC – Level III</li> <li>• Cultural competency</li> <li>• Professional competencies</li> </ul>   | <b>70%</b>       |
| <b>Practicum</b>   | Practicum hours can be counted as hours of work experience (practicum report must be submitted)  |                  |
| <b>GENERAL KNOWLEDGE AND SKILLS IN SUPPORT OF PROFESSIONAL PRACTICE</b>  |  | <b>180 hours</b> |
| • Writing skills   |  | 15               |
| • Interpersonal and collaborative communication  |  | 15               |
| • Education Research methodologies   |  | 15               |
| • Curriculum development process, methods  |  | 25               |
| • Culture-responsive assessments, test and exam development  |  | 15               |
| • Training program implementation and evaluation   |  | 15               |
| • Principles of Adult Education  |  | 15               |
| • Indigenous holistic approaches to education  |  | 25               |
| • Educational technology   |  | 15               |
| • Motivational Interviewing  |  | 15               |
| • Change theories  |  | 10               |

| <b>9 CORE FUNCTIONS OF A CID-KPC - Level III</b> (can be acquired via training or/and on the job practice) |  | <b>220 hours</b> |
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| 1. Program Management  |  | 20               |
| 2. Resource management   |  | 20               |
| 3. Education   |  | 30               |
| 4. Referrals/networking  |  | 20               |
| 5. Community outreach  |  | 20               |
| 6. Knowledge building  |  | 30               |
| 7. Teamwork  |  | 20               |
| 8. Administration  |  | 20               |
| 9. Supervision   |  | 40               |

| <b>CULTURAL KNOWLEDGE AND SKILLS</b> | <b>80 hours</b> |
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Cultural/traditional knowledge on topics specific to Aboriginal culture, traditions and/or history, acquired through formal or informal training or through activities pursued in the context of community support/awareness work

- | <b>CULTURAL AND PROFESSIONAL COMPETENCIES</b>  |
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| <ul style="list-style-type: none"> <li>- Cultural competency</li> <li>- Indigenous language skills</li> <li>- Professional attitude</li> </ul> |

**NOTE: EDUCATION/TRAINING**  
 The required addictions-specific and addictions related hours may be acquired through formal education programs at university or college level or through more informal training in a variety of formats, offered by independent trainers, training organisations or through alternative means recognized by ICBOC.

| <b>DIABETES RELATED KNOWLEDGE AND SKILLS</b>   |
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| <p>The following topics are accepted as part of the training requirements for the CID-KPC certification. This list not exhaustive. If in doubt regarding training you took or intend to take, please contact ICBOC.</p> <p>You can complete training on one or several topics as long as the total hours come to a <b>minimum of 50 hours</b>.</p> |

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| <ul style="list-style-type: none"> <li>• Grief and loss</li> <li>• FASD</li> <li>• Stress &amp; PTSD</li> <li>• HIV/AIDS and STDs</li> <li>• Trauma</li> <li>• Suicide</li> <li>• Safety (WHMIS, First aid etc...)</li> <li>• Healthy parenting</li> <li>• Healthy nutrition</li> <li>• Stages of change</li> <li>• Resilience</li> <li>• Medicine wheel</li> </ul> | <ul style="list-style-type: none"> <li>• Humour, laughter and health</li> <li>• Cultural wellness practices</li> <li>• Diabetes and substance abuse</li> <li>• Diabetes and mental health issues</li> <li>• Healthy lifestyle/life coaching topics</li> <li>• Diabetes and pregnancy</li> <li>• New advances in diabetes</li> <li>• Impacts of colonization</li> <li>• Residential School &amp; Intergenerational Trauma</li> <li>• Other Indigenous cultures' approaches related to health and wellness</li> <li>• Concepts and practices of decolonization</li> </ul> | <ul style="list-style-type: none"> <li>• Self-care</li> <li>• Professional ethics</li> <li>• Work planning</li> <li>• Record Keeping</li> <li>• Report writing</li> <li>• Computer technology</li> <li>• Time management</li> <li>• Life coaching</li> <li>• Chronic case model</li> <li>• Indigenous foods and medicines</li> </ul> |
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| <b>DETAILS – CORE KNOWLEDGE IN DIABETES</b> |
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| <ul style="list-style-type: none"> <li>• <b>Anatomy and physiological processes linked to diabetes</b><br/>           Impact of diabetes on the body systems (skeletal, muscular, respiratory, digestive, nervous, endocrine, cardiovascular, urinary, reproductive systems and eye disease)</li> </ul>  |
| <ul style="list-style-type: none"> <li>• <b>Pathophysiology</b> <ul style="list-style-type: none"> <li>- Types and Causes of diabetes (prediabetes, gestational diabetes, type 1 and 2 diabetes)</li> <li>- Signs and symptoms of diabetes Type 1 and 2</li> <li>- Complications of Diabetes</li> </ul> </li> </ul>  |
| <ul style="list-style-type: none"> <li>• <b>Pharmacological aspects of Diabetes</b> <ul style="list-style-type: none"> <li>- Types of non-insulin anti-hyperglycemic medications – How they work, what are they prescribed for, potential side effects, and other therapeutic considerations</li> <li>- Types of insulin in terms of how they are used, how they work, their side effects and other therapeutic considerations.</li> </ul> </li> </ul> |

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| <ul style="list-style-type: none"> <li>• <b>Epidemiology of diabetes among Indigenous communities in Canada</b></li> </ul> |
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| <ul style="list-style-type: none"> <li>- Risk factors for the development of diabetes over the lifespan <ul style="list-style-type: none"> <li>o Risk factors for prediabetes</li> <li>o Risk factors for Diabetes 1</li> <li>o Risk factors for Diabetes 2</li> </ul> </li> <li>- Prevalence of prediabetes and diabetes in Indigenous communities</li> </ul>   |
| <ul style="list-style-type: none"> <li>• <b>Lifespan and other special issues related to diabetes</b> <ul style="list-style-type: none"> <li>- Respective assessment and diabetes management for pregnant women, infants children, adolescents, adults and elderly</li> <li>- Diabetes management strategy in special situations – travel, driving, illness, fasting surgery and other medical interventions</li> </ul> </li> </ul>  |
| <ul style="list-style-type: none"> <li>• <b>Psychosocial impact of diabetes on the individual, the family and community</b> <ul style="list-style-type: none"> <li>- Emotional impact (ex. grief and shame, anxiety, depression, denial, care resistance)</li> <li>- Long term impact (ex. impact of physical disabilities, surgeries, financial costs)</li> </ul> </li> </ul>   |
| <ul style="list-style-type: none"> <li>• <b>Foot care issues</b> <ul style="list-style-type: none"> <li>- Risks of injuries</li> <li>- Foot hygiene</li> <li>- Nail care, Corn/callus care</li> <li>- Skin care</li> <li>- Foot wear and other assistive items</li> <li>- Surgical interventions</li> </ul> </li> </ul>  |
| <ul style="list-style-type: none"> <li>• <b>Education in diabetes self-management and care</b> <ul style="list-style-type: none"> <li>- Indigenous approaches to teaching and learning</li> <li>- Common myths related to diabetes and diabetes care</li> <li>- Impact of diabetes and its treatment on the person and family members</li> <li>- Diabetes medication management (diabetes 1 and 2)</li> <li>- Glucose monitoring</li> <li>- Blood glucose levels and impacts - hyperglycemia and hypoglycemia</li> <li>- Basic foot care management</li> <li>- Smoking and alcohol</li> <li>- Community resources for diabetes care and healthy living support</li> <li>- Risk reduction</li> <li>- Foot care</li> <li>- Diabetes care/wellness plans</li> </ul> </li> </ul> |
| <ul style="list-style-type: none"> <li>• <b>Health promotion &amp; diabetes prevention</b> <ul style="list-style-type: none"> <li>- Healthy Lifestyle (Indigenous lens) <ul style="list-style-type: none"> <li>o Healthy diet</li> <li>o Physical activity</li> <li>o Psychological approaches to wellness</li> <li>o Traditional approaches to Diabetes prevention and care</li> </ul> </li> </ul> </li> </ul>  |
| <ul style="list-style-type: none"> <li>• <b>Models of diabetes care</b> <ul style="list-style-type: none"> <li>- Chronic Care Model (CCM) <ul style="list-style-type: none"> <li>o Concepts</li> <li>o Challenges</li> </ul> </li> <li>- Other approaches</li> </ul> </li> </ul>   |
| <ul style="list-style-type: none"> <li>• <b>Healthy lifestyle approaches to diabetes (Indigenous lens)</b> <ul style="list-style-type: none"> <li>- Indigenous holistic perspectives on health and wellbeing</li> <li>- On the land activities</li> <li>- Country foods</li> <li>- Indigenous medicines</li> <li>- Traditional ceremonies and teachings on living a good life</li> <li>- Traditional crafts</li> <li>- Traditional parenting</li> </ul> </li> </ul>  |

## Core Functions Description

### Diabetes Knowledge Program Coordinators

1. **Program Management:** Planning, developing and implementing culturally appropriate strategies, training, programs, events and services addressing the prevention/management of diabetes for Indigenous clients and communities that meet their needs and satisfy program goals.
2. **Resource Management:** Developing new, culturally appropriate resources based on need, maintaining stock of existing resources, and managing distribution of resources to clients and communities based on individual need.
3. **Education:** Providing clients and community partners with culturally appropriate, relevant, evidence-based, current information on best practices in the field of diabetes prevention and management for Indigenous people; knowledge gathering and sharing can take the form of research, training, individual and group programs, community events.
4. **Referrals/networking:** Identifying the needs of the client or community partner that fall outside of the scope of practice of a diabetes program or initiative or the range of services provided; liaising with service providers to connect client with appropriate service.
5. **Community Outreach:** Liaising with Indigenous communities and service providers to identify and provide culturally appropriate training, care and treatment options for community members while advancing IDHC's mandate, mission and values.
6. **Knowledge building:** Maintaining an up-to-date, evidence-based knowledge bank consistent with current information and new advances pertaining to the prevention and management of diabetes in the Indigenous population; methods of knowledge gathering can include personal data gathering, attending conferences and training, consulting elders and other traditional knowledge keepers, participating in traditional activities and ceremony.  
  
Includes the identification of knowledge gaps for self and supervised staff and knowledge building through relevant learning and training activities. Includes the development of training plans and the management of training opportunity for staff.
7. **Teamwork:** Collaborating with IDHC staff, community partners and other relevant stakeholders to advance the mandate of IDHC; representing IDHC at meetings, conferences, events, and in communities.
8. **Administration:** Preparing program reports, work plans and budgets; monitoring client files and documenting information relevant to assessment, treatment planning and referrals for the duration of the client's involvement with IDHC.
9. **Supervision:** Responsibility for managing staff, communications strategies, maintaining budget, meeting program standards and benchmarks, and reporting on program performance.