

# CDE Maintenance by Credit Portfolio

## What do I need to know?

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RD CDE

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DIABETES



# CDE Maintenance by Credit Portfolio

## Require 250 Credits

.....You can submit more

**Only 50% of the credits can  
come from one category**

# CDE Maintenance by Credit Portfolio

**You can start to collect credits June 1<sup>st</sup> of the year you write the exam.**

\*If you have completed a portfolio the start date is January 1<sup>st</sup>.

# CDE Maintenance by Credit Portfolio

This presentation uses forms from 2018 as examples.

If using these forms you must use the 2018 Credit Portfolio Handbook and Competencies.

**The 2019 Credit Portfolio has many changes.**

**When you submit your portfolio you can select which forms you are using.**

# CDE Maintenance by Credit Portfolio

Activities must:

- Enhance competency
- Demonstrate professional leadership
- Be new learning

# Categories of the Portfolio

Form	Document
<b>1A</b>	External review of CDE practice
<b>1C</b>	Self-Assessment of Learning Need/Report on Self-Study Plan
<b>2A - Short Courses</b>	Short Term Learning Events - Short Courses
<b>2B</b>	Formal Courses
<b>3A</b>	Report of Self Study Plan Developed in 1B
<b>3B</b>	Self-Study - through Reading
<b>3B_books</b>	Self-Study - Books Read
<b>4A</b>	Development and Evaluation of New Diabetes related Educational Materials and Resources
<b>4B</b>	Preceptorship of Students or New Diabetes Educator
<b>4C</b>	Development or Significant Revision of a Program for Preceptorship of Students or New Diabetes Educator
<b>4D</b>	Development and/or Revision and Evaluation of a Patient or Professional Education Program
<b>4E</b>	Short Presentations or Teaching
<b>4F</b>	Presentation as Part of a Professional Conference
<b>4G</b>	Teaching or Tutoring in a Course in an Academic or Recognized Institution
<b>4H</b>	Writing Examination Questions for Regulatory Body
<b>5A</b>	Peer-Reviewed Publications
<b>5B</b>	Non-Peer Reviewed Publications and Peer Reviewed Case Studies or Letters
<b>5C</b>	Publication of Books (peer-reviewed)
<b>5D</b>	Involvement in Research Projects - proposal writing
<b>5D QI</b>	Involvement in Quality Improvement - Creating the Project Charter
<b>5E i</b>	Involvement in Research Projects - Implementation, Data Analysis, interpretation and Dissemination Phases
<b>5E ii</b>	Policy and Procedure Development
<b>5E iii</b>	Involvement in Quality Improvement Project - Implementation
<b>5F</b>	Editorial Board, Editor or Associate Editor for Diabetes Related Professional Journal
<b>5G</b>	Development of Best Practice Guidelines or Clinical Practice Guidelines, Member of an Expert Panel
<b>5H</b>	Program Evaluation - Design and Implementation
<b>5I</b>	External Reviewer for Provincial, National or Regional Resources

## Common Categories

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<b>1C</b>	Self-Assessment of Learning Need/Report on Self-Study Plan
<b>2A - Short Courses</b>	Short Term Learning Events - Short Courses
<b>2B</b>	Formal Courses
<b>3A</b>	Report of Self Study Plan Developed in 1B
<b>3B Journals</b>	Self-Study - through Reading
<b>3B Books</b>	Self-Study - Books Read
<b>4A</b>	Development and Evaluation of New Diabetes related Educational Materials and Resources

## Forms

Download from:

[www.cdecb.ca/credit-portfolio/cp-forms-word-format](http://www.cdecb.ca/credit-portfolio/cp-forms-word-format)

Questions:

[cpquestions@cdecb.ca](mailto:cpquestions@cdecb.ca)



## Common Categories

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### **IC Self-Assessment of Learning Need/Report on Self-Study Plan**

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Part A *Self Assessment of a learning Need and Outline of a Self Study Plan*

**Dietitian:** Self Directed Learning Tool and Goal (diabetes related)

\*Signed by manager or CDE

**Nursing:** QI Self Assessment, Practice Reflection and Learning Plan

\*Signed by manager or CDE

Part B *Report on Self Study Plan*

15 credits/year

# Form 1C: Self-Assessment of a Learning Need/Report on Self-Study Plan

15 Credits per Credit Collection Year when both part A and part B are completed.

Issued: 2018

NAME: [ ] CTFN No.: [ ]

## Part A: Self-Assessment of a Learning Need and Outline of a Self-Study Plan

The Self-Assessment of a Learning Need and outline of a Self-Study Plan may be done annually by the CDE and signed by their Manager or, if the manager is unavailable, another CDE familiar with the CDE's practice.

Credit Collection Year: [ ]

LEARNING NEED	1 to 3 Related CDE Competencies/Description		
[ ]	CDE competency: [ ] / [ ]		
How do you plan to address your learning need? Tick as many learning methods that apply and add others as needed.			
Audio/video	<input type="checkbox"/>	Reading articles	<input type="checkbox"/>
Continuing education event	<input type="checkbox"/>	Discussion with colleagues	<input type="checkbox"/>
Organized clinical learning experience	<input type="checkbox"/>	Planned literature search and summary	<input type="checkbox"/>
Internet search	<input type="checkbox"/>	[ ]	<input type="checkbox"/>
[ ]	<input type="checkbox"/>	[ ]	<input type="checkbox"/>
How will you use this knowledge in your practice?			
[ ]			
Manager's Name: (print)	[ ]	Manager's Signature:	[ ]
OR ANOTHER CDE MAY SIGN ONLY IF A MANAGER IS UNAVAILABLE TO SIGN			
CTFN No.:	Name: (print)	Signature:	
[ ]	[ ]	[ ]	

This needs to be signed by your manager.

Date Signed: \_\_\_\_\_

For credit, Part B on next page must also be completed.

# Form 1C: Self-Assessment of a Learning Need/Report on Self-Study Plan

15 Credits per Credit Collection Year when both part A and part B are completed.

Issued: 2018

NAME:	CTFN No.:
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## Part B: Report on Self-Study Plan

Date completed: [Click here to enter a date.](#)

Indicate learning method(s) used to satisfy learning need					
Audio/video	<input type="checkbox"/>	Reading articles	<input type="checkbox"/>	Internet search	<input type="checkbox"/>
Continuing education event	<input type="checkbox"/>	Discussion with colleagues	<input type="checkbox"/>		<input type="checkbox"/>
Planned literature search and summary	<input type="checkbox"/>	Organized clinical learning experience	<input type="checkbox"/>		<input type="checkbox"/>
	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>
Summary of learning: <input type="text"/>					
How will you use this knowledge in your practice? <input type="text"/>					

You may claim credit for this activity only once you have completed Part A and Part B. For any Credit Collection Year we accept credit from one form 1C (15 credits) OR one form 1B (10 credits) and a corresponding form 3A (5 credits).

## Common Categories

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### **2A Short Courses**

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Conferences, workshops, DES meeting

DC professional conference maximum 18 credits

Over 4 hours requires documentation

1 credits/hour

## 2A Short Courses

<b>Form 2A: Short Term Learning Events</b>	Issued: 2018
NAME:	
CTFN No.:	Credits this Pa

Download the page, insert your name and CDE number then copy the original

NAME: [ ]	CTFN No.: [ ]
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Notes: Name and CFTNO will repeat in the header on each page.  
 Cells will expand as you type. You can use Tab to move cursor.  
 For check box, place cursor over box then left click or spacebar to check/uncheck.

↓	Item	Name of Event and Organization or Sponsor	↓	1 to 3 CDE Competencies	Supporting Documentation in Portfolio		↓
	Date			Topic	Length	Credits	
↑	[ ]	[ ]	↓	[ ]	[ ]	[ ]	[ ]
↑	[ ]	[ ]	↓	[ ]	[ ]	[ ]	[ ]
↑	[ ]	[ ]	↓	[ ]	[ ]	[ ]	[ ]
↑	[ ]	[ ]	↓	[ ]	[ ]	[ ]	[ ]
↑	[ ]	[ ]	↓	[ ]	[ ]	[ ]	[ ]
↑	[ ]	[ ]	↓	[ ]	[ ]	[ ]	[ ]
↑	[ ]	[ ]	↓	[ ]	[ ]	[ ]	[ ]

# 2A Short Courses

## Form 2A: Short Term Learning Events

NAME:

CFTNO:



NAME:

Notes: Name and CFTNO will repeat in the header on each page.  
Cells will expand as you type. You can use Tab to move between cells.  
For check box, place cursor over box then left click.

Date should be written with the month as:

**1 June 2013 or July 2, 2018**

**Numerically dd/mm/yyyy**

Item	Name of Event and Organization or Sponsor		Date					
<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>

## 2A Short Courses: 5 credits per course

<b>Form 2A: Short Term Learning Events - Short Courses</b>		Issued: 2018
5 Credits per Short Course with Documentation		
NAME:		Credits this Page:
CTFN No.:		

NAME: <input type="text"/>	CTFN No.: <input type="text"/>
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Notes: Name and CTFN No. will repeat in the header on each page.  
 Cells will expand as you type. You can use Tab to move cursor.  
 For check box, place cursor over box then left click or spacebar to check/uncheck.

↓	Item	Name of Event and Organization or Sponsor	↓	1 to 3 CDE Competencies	Supporting Documentation in Portfolio	↓
	Date			Topic	Credits	
<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>

## 2A Short Courses

<b>Form 2A: Short Term Learning Events</b>	Issued: 2016
NAME: Wendy Graham	Credits This Page:
CFTNO: 0503000695	

**NAME: Wendy Graham**      **CFTNO: 0503000695**

Notes: Name and CFTNO will repeat in the header on each page.

Cells will expand as you type. You can use Tab to move cursor.

For check box, place cursor over box then left click or spacebar to check/uncheck.



Item	Date	Name of Event and Organization or Sponsor	1 to 3 CDE Competencies	Supporting Documentation in Portfolio			
				Topic	Length		Credits
	15 Dec 15	Webinar Keeping Current Diabetes Developments 2015 Novo Nordisk	1.A 1.B	Weird Diabetes cases LADA Dr. Jerry Palmer	1	1	<input checked="" type="checkbox"/>
	1 June 16	CDA Webinar Tracey Frem	3.9 A	Technology and Type 1 diabetes	1	1	<input type="checkbox"/>
	24 Feb 16	CDA Webinar Dr John Sievenpiper	2.B 2.D	Is Sugar to Blame	1	1	<input type="checkbox"/>
	2,3 March 16	Sick Childrens Hospital	4.J	Cultural Competencies			<input checked="" type="checkbox"/>
	17 Feb 16	DES Meeting Dr. Luitkus	3.1 A	Update on Diabetes Pharmacotherapy GLP-1	1	1	<input type="checkbox"/>
	4 May 16	DES Meeting	2.D	Nutrition, Diabetes and CKD:designing diets for a complex population	1.5	2	<input checked="" type="checkbox"/>



## 2A Short Courses

No Credit for learning the

- basic operation of blood glucose meters
- basic operation of insulin pens

The activity must contain learning of a teaching tool such as pattern management or insulin adjustment.

## 2A Short Courses

### **Pump Training**

For each pump listed you may claim once

- Initial training
- Workshop on Advanced features

### **CGM**

You may claim once

- Initial Training
- Workshop on interpreting CGM reports

Revised for 2016

# 3B Reading Journals

Download the page, insert your name and CDE number then copy the original

<b>Form 3B: Self-Study - Through Reading</b>	Issued: 2018
NAME:	Credits this Page:
CTFN No.:	

<b>NAME</b> <input type="text"/>	<b>CTFN No.:</b> <input type="text"/>
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Notes: Name and CTFN No. will repeat in header on each page.  
Cells will expand as you type. You can use Tab to move cursor.

Author (1 <sup>st</sup> and 2 <sup>nd</sup> )	Journal Name or Internet CME Site	1 to 3 CDE Competencies		Credits
		Articles: Title, Vol. (issue), pages. -OR - Internet CME: Program Title	↓	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

## 3B Reading Journals

Download the page, insert your name and CDE number then copy the original

**Form 3B: Self-Study - Through Reading**

NAME: Wendy Graham

CTFN No.: 0503000695

Issued

Credit

**NAME: Wendy Graham**      **CTFN No.: 0503000695**

Notes: Name and CTFN No. will repeat in header on each page.  
Cells will expand as you type. You can use Tab to move cursor.

Author (1 <sup>st</sup> and 2 <sup>nd</sup> )	Journal Name or Internet CME Site	1 to 3 CDE Competencies		Credits
		Articles: Title, Vol. (issue), pages. -OR - Internet CME: Program Title	↓	
Brahm, Aj , Wang G et al	Canadian Journal of Diabetes	Genetic confirmation rate in clinically suspected Maturity-Onset Diabetes of the Young. 40(6):555-560	1.B	0.5
Rowan CP, Riddell MC et al	Canadian Journal of Diabetes	Community based culturally preferred physical activity intervention targeting populations at high risk for Type 2 diabetes: results and implications. 40(6): 561- 569.	3.3.A 4.J	0.5
Nolan Rc, Raynor AJ et al	Canadian Journal of Diabetes	Self-reported physical activity using the international physical activity questionnaire(IPAQ) in Australian adults with Type 2	3.3.A	0.5

## 3B Reading Journals

Canadian Journal of Diabetes documented from 2016.

Only articles '**Original Research**' or '**Review**' can be used.

# Within Categories



2A 2015

2A 2016

2A 2017

3B CJD 17

3B The Diabetes  
Communicator

3B Diabetes Care Nov 16

3B Cholesterol

3B Ketogenic Diets

3B Pregnancy

3B Pumps

# Storage



Conference Agenda  
Conference Certificates  
Completed pages – Reading  
Evaluations

# Keep a Summary

## CDE Credit Portfolio Summary - 250 points required

Form	Activity	Page	2015	2016	2017	2018	2019
1C	Self Assessment Need/ Study Plan (15)						
2A	Short Courses						
2B	Formal Courses						
3B	Self-Study Journal Reading						
3B	Self- Study Books						
4A	Develop & Evaluate Educational Resource (15)						



# Application Date

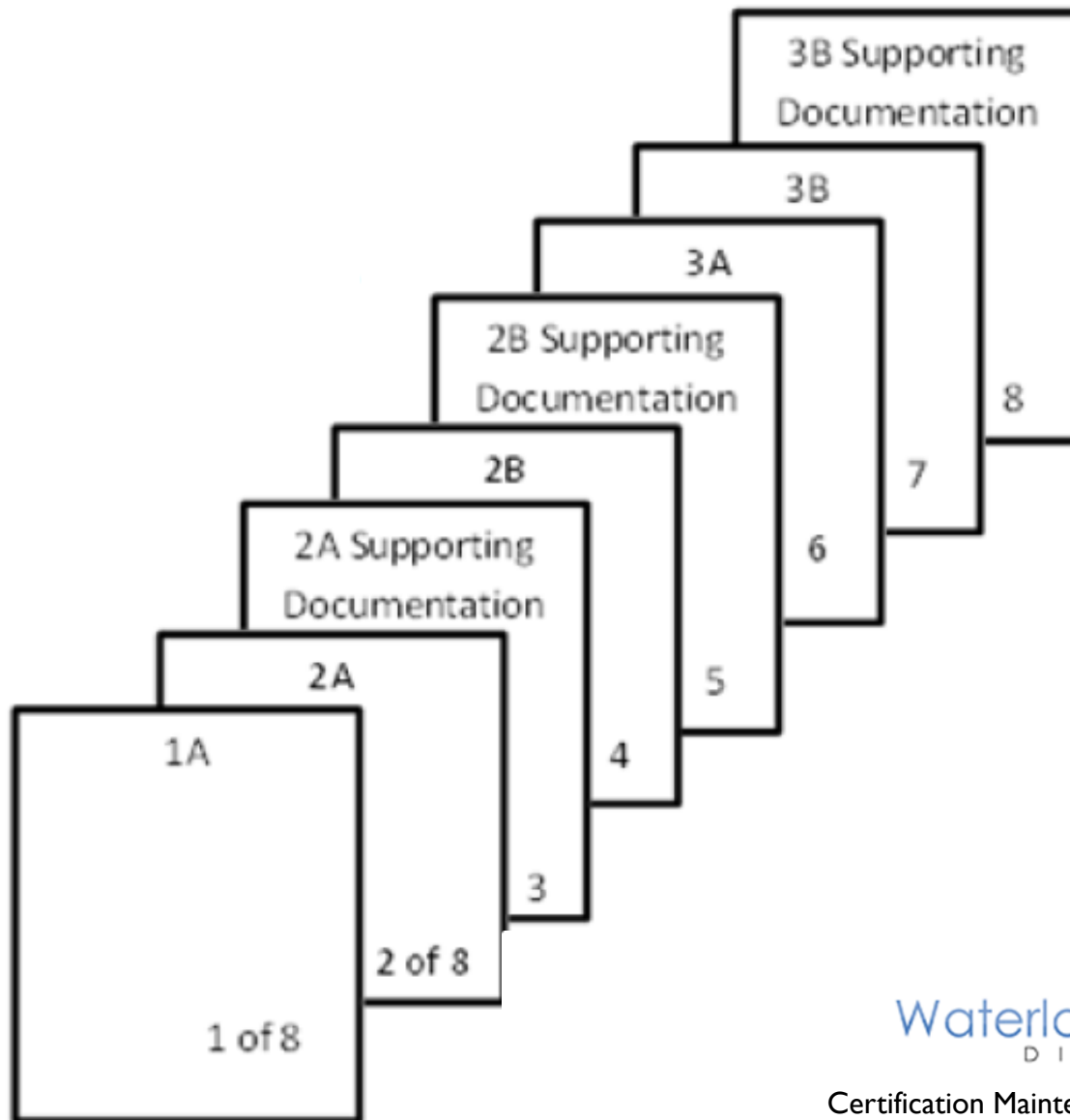
February 1st



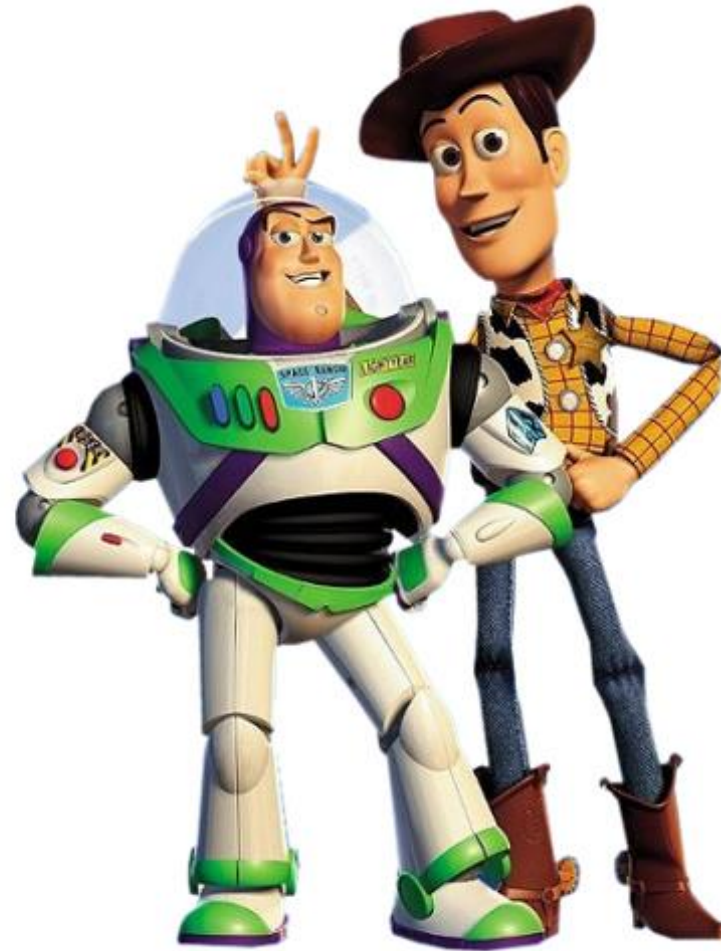
FEBRUARY 2011						
SUN	MON	TUES	WED	THURS	FRI	SAT
		<b>1st</b>	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28					

# Assembly of your Portfolio

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# Find a CDE Buddy



Remind each other to record events such as in-services, conferences, DC professional meetings.

# Find a CDE Buddy



Share journals articles which you have read.

# Questions

