

# Meet Your 2016-2018 Strategic Plan and Two AADE Change Champions



HOPE WARSHAW, MMSC, RD,  
CDE, BC-ADM, FADE  
2016 PRESIDENT

It's my honor and privilege to serve as your 2016 AADE President. Having spent the entirety of my nearly 40-year career as a registered dietitian in the field of diabetes care and education, I believe wholeheartedly that we are at a critically pivotal point in our profession.

As I hope you'll agree, the new AADE strategic plan—which will drive our organization during 2016-2018 and I'll introduce you to—encompasses our evolving roles and responsibilities as diabetes educators within which societal changes, the digital revolution, and the transformation of our health care system as a whole and systems individually are taking place. But before I launch into a bird's eye view of our strategic plan, a few heartfelt thank yous. While the entire Board of Directors (BOD) worked tirelessly since mid-2014 to create this plan, 3 people in particular were at the helm steering our course: Joan Bardsley, Deborah Greenwood, and Donna Ryan. Kudos to them and the entire BOD! I encourage you to review AADE's 2016-2018 strategic plan and related documents at [diabeteseducator.org/strategicplan](http://diabeteseducator.org/strategicplan).

Through the 6 president columns I'll pen this year, I want to familiarize you with 6 key strategies and outcomes in our new plan. As a way to shine the light on you, our AADE members, I'll also profile 2 Change Champions in each letter. These are AADE members who, through their work, embody 1 of our 6 key strategies. Consider these individuals just 2 Change Champions among us doing extraordinary work to evolve our profession and achieve our strategic goals.

The two Change Champions you'll meet on the opposite page embody the strategy within our strategic plan that focuses on digital technology and the connected health environment. We need to expand and leverage technology and the connected health environment as a means to reach more people and chronically engage individuals with diabetes in their care in manners that fit their life schedule and lifestyles. Telehealth, digital technologies, and population health management are important elements in health care transformation. The Change Champions profiled are using telehealth and communication technologies to collaborate with people with diabetes to achieve positive outcomes clinically and cost-effectively. That's what it's all about, isn't it?

Now, please take a few moments. Think about how you could or are embracing our 2016-2018 strategies and outcomes. How is your work evolving our profession? Do you have a colleague who is an AADE Change Champion? Let your state Coordinating Body leader know or email us at [changechampions@aaadenet.org](mailto:changechampions@aaadenet.org).

I look forward to connecting with you over the next year and getting to know you through 1 or more of the amazing opportunities we have as AADE members, like at AADE16 in sunny San Diego. If you use social media, please follow me on Twitter or Instagram @HopeWarshaw and share your thoughts. I want to hear from you! ■



AADE

# Change Champions

**Sherri Isaak** MS, RD, CDE, BC-ADM  
Clinical Director/Nutrition Coach, Fit4D

At Fit4D, Certified Diabetes Educators use technology to help people manage their diabetes through improving medication adherence and guiding lifestyle choices. Our goal is to provide support between the person's appointments with their provider and/or diabetes educator.

Fit4D started nearly a decade ago offering 1:1 virtual coaching through fit4d.com. Our CEO, who has type 1 diabetes, wanted to help a greater volume of people access diabetes education and support on their schedule, when and where they needed it most. Through the advancement of technology, we now reach people using a mix of intelligent algorithms, coupled with phone coaching, webinars, support groups, texting, and email.

My CDE team managers, Teresa McArthur and Gabrielle Kemble, have been my personal Change Champions. They both started with Fit4D as CDE coaches and were promoted to managers. They each use their managerial skills to coach our CDEs in a positive way while improving our program quality through monitoring patient interactions.

Implementing our technology platform most efficiently and effectively to meet our needs and the needs of our clients was an initial challenge. We are continually making tweaks to improve it. We want this to be user friendly for the CDE as well as the person living with diabetes.

The skills I've needed and continue to need in this role are using multiple types of technology and algorithms most efficiently and effectively. I've needed to learn what it takes to connect and educate clients virtually and personalize their entire experience.

Stay tuned for our published research, but early data indicate a decrease in A1C and improved adherence. That's what it's all about!



**Susan Lehrer** RN, BSN, CDE  
Associate Executive Director, Telehealth Office, NYC  
Health and Hospitals Corporation

For people with diabetes, the House Calls Telehealth (TH) program is an effective new tool to help people change their behaviors. The use of simple technology transmits real-time data to our house calls staff—thus allowing telehealth clinicians the ability to deliver targeted diabetes education in the moment that is most effective and therefore most important to the participant.

To create this program, we had some amazing Change Champions advocating for us. There were several MDs who were excited about the prospects and possibilities of telehealth to make a difference in the care of people with diabetes and believed it could help address limited resources and staff. They were very open to new approaches in individualized care plans and willing to work closely with us to empower and support our staff through education and clinical recommendations.

However, we did face challenges such as training RNs and CDEs on a new model of care and gaining recognition from our facilities in the form of referrals, which was a change of behavior for them.

The TH program works by transmitting blood glucose (BG) and blood pressure (BP) data throughout the day from patients' homes to a HIPPA secure website portal via a small modem wirelessly connected to the glucose meter and BP cuffs. A team of experienced RNs, CDEs, and care coordinators can then respond as needed as well as track trends in A1C and lipid values. Most importantly, our weekly calls with patients are informed by real-time data. This facilitates a true connection between patients and staff that supports the essentials of a trusting relationship.

For this program to succeed, it was critical that we develop communication skills that ensure honest and "comforting" relationships with patients over the phone. Our staff had to gain the understanding that in order to help patients achieve their clinical outcomes, we needed to help transform their belief that change is possible and that their disease was manageable. It's so motivating to see the positive results coming from this program and the impact it's having on people's lives. Such an exciting time!