

## Sweeten the Message: Creation of the Diabetes Management Committee and the Nurse Specialist

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## Diabetes

- Approximately 9.3% of the population has diabetes
- 1.4 million Americans are diagnosed with diabetes every year
- 12.8% of the Hispanic Americans have diabetes
- Diabetes remains the 7th leading cause of death in the United States

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## Our Demographics

- Approximately 30% of our inpatient adults have a primary or secondary diagnosis of diabetes
- Hospital located in a city
- 50% of population of city is Hispanic

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## Increased Complications

- Risk of death is 50% higher than those without diabetes
- Higher risk for serious health complications:
  - Blindness, amputation, stroke, kidney disease
- Increased LOS
- Slower healing

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## Gap in Best practice

- Adult inpatients with diabetes have an order for ac-hs Blood glucose checks.
- Gap: These checks were being completed at times unrelated to when the patient was eating.
  - Room service allows trays to be delivered at patient's request
  - All blood glucoses performed by CCT at computer driven reminder times, not patient specific.
  - Insulin was being administered using blood glucose which may have been completed hours before the meal.

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## Creation of Diabetes Committee

- Group of Adult RNs and Nurse Educator, Pediatric Nurse Educator and an endocrinologist.
- Met quarterly
- Discussed best practice
- Initiated project pilot- Called the Goldilocks project- on 2 inpatient Adult units

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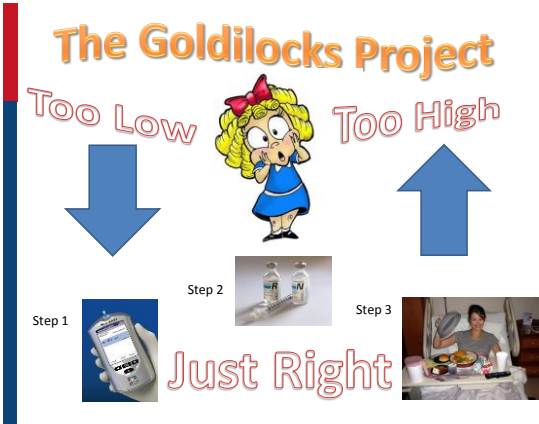
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### Goldilocks

- Assistance from children’s hospital in planning
- Piloted on 2 Adult Medical-Surgical/Telemetry Units
- Process created:
  - Tray delivered to nursing station
  - Tray brought into room by RN or CCT
  - Blood glucose checked
  - RN notified, insulin given if needed

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### Goldilocks

- Goal: Better glycemic control
- Following best practice
- Increased awareness regarding care for our patients with Diabetes
- Increased awareness of the educational opportunities for nurses and patients.

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## Gap in Best Practice

- During initiation of project, Diabetes education was to be given to the patient by the nurses.
- Gap: Nurses did not have tools needed to teach.
- Gap: Nurses have varied knowledge base.

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## Creation of Interdisciplinary Diabetes Management Committee

- Diabetes committee expanded to Interdisciplinary committee with monthly meetings.
- Co-chairs: Adult CNE and Pediatric CNE
  - Adult and Pediatric RNs
  - Adult and Pediatric Endocrinologists
  - CDE
  - Pharmacy
  - Nutrition

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## Diabetes Nurse Specialist Role Creation

- Integral participant in committee
- Can be used for the professional advancement system

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## Goals/Objectives for Specialist Role

- Increase overall hospital compliance with initiatives to promote strict glycemic control
- Promote understanding within the patient population and nursing staff regarding diabetes care and management
- Increase patient/employee satisfaction/engagement
- Promote staff professional growth through active participation in the program
- Increase hospital reimbursement through prevention/reduction of hospital readmission due to poor diabetes care/control and co-morbidities related to diabetes

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## Action Plan

- Bring education back to units
  - Tip of the month
  - Policy Change/Updates
  - Education promotion
- Preferably two RNs on opposite weekends, but only 1 need to attend committee
- Collaboration from unit RN to CCT/PCT to support education initiatives

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## Role of Diabetes Specialist

- Serve as a resource person
- Collaborate with unit CNE/CNS in providing education/training to co-workers
- Disseminate and emphasize the importance/benefits/implications of proper diabetes management for the nurses and patients.
- Attend Diabetes Committee monthly
- Assist in seeking solutions to barriers related to the care of the diabetes patients.
- Become familiar with diabetes website, Policies & Procedures, roles and responsibilities of clinical staff & administrative staff, educational resources, diabetes educational supplies and equipment.
- Provide an update on unit specific current practices related to Diabetes to the Unit Based Council meeting and Diabetes Committee on a monthly basis
- Give input/ideas on how to improve/enhance diabetes program including online education, standards of practice, policies and procedures in accordance to updated evidence based practice nursing.

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## Diabetes Nurse Specialist

DIABETES MODULE
<b>Purpose</b> Develop a comprehensive Diabetes Care and Education program through active participation of the clinical staff and support of the administrative staff for patient and employees.
<b>Goals/Objectives</b> <ul style="list-style-type: none"><li>● Increase overall hospital compliance with initiatives to promote strict glycemic control</li><li>● Promote understanding within the patient population and nursing staff regarding diabetes care and management</li><li>● Increase patient/employee self-care management</li><li>● Promote staff professional growth through active participation in the program</li><li>● Increase hospital reimbursement through prevention/reduction of hospital readmission due to poor diabetes care/control and co-morbidities related to diabetes.</li></ul>
<b>Action Plan</b>
<b>1. Create a unit based Diabetes Specialist role</b> <ul style="list-style-type: none"><li>● Recruit 2 staff RNs on each shift working opposite weekends to serve as Diabetes Specialists (2 on days and 2 on nights)</li><li>● Diabetes Specialist will select/insert a CCT/PCT to assist with project</li></ul>
<b>2. Role of Diabetes Specialist</b> <ul style="list-style-type: none"><li>● Serve as a resource person with diabetes education and care of patient with diabetes.</li><li>● Collaborate with unit CME/CEU in providing education/training to co-workers</li><li>● Determine and emphasize the importance/significance/importance of proper diabetes management for the nurses and patients.</li><li>● Attend Diabetes Committee monthly—4th Wednesday of every month 3-2</li><li>● Assist in working solutions to barriers related to the care of the diabetes patients.</li><li>● Submit a written report/letter whenever an educational/training program is completed in the Diabetes CME/CEU units (Stephanie Murray DMSC/Nehruva Ramani)</li><li>● Become familiar with diabetes supplies, policies &amp; procedures, roles and responsibilities of clinical staff &amp; administrative staff</li><li>● Become knowledgeable on various diabetes equipment for the purpose of teaching others.</li><li>● Provide an update on unit specific concerns/parameters related to Diabetes to the Unit Based Council meeting and Diabetes Committee on a monthly basis</li><li>● Give input/ideas on how to improve/enhance diabetes program including unit based education, standards of practice, policies and procedures in accordance to updated evidence based practice nursing.</li></ul>

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## Projects

- Movement towards:
  - Best Practice
    - Hypoglycemia Protocol
    - Insulin Pump
  - Education (Patients and Nursing)
    - Insulin Pen Teaching Box
    - Research Scholar
    - Intranet Resources
  - Standardized Care
    - Discharge instructions
  - Focus on Diabetes as a priority
    - Future Projects

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## Hypoglycemia Policy

- Nurse Driven Protocol
- Expedites patient treatment
- Prevents over/under-treatment

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## Insulin Pump Policy

- Addresses the issue of nursing competency on in-frequently seen devices
- Allows patients to maintain pump and maintain standard of care
- Guidelines for how to care for these patients

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## Insulin Pen Teaching Boxes

- Teaching boxes with pens/needles/injection pads
- Education material
  - Hand-outs for patients
  - Step-by-step guide for teaching
- Diabetes Specialists as experts to assist with teaching staff to teach patients

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## Diabetes Research Scholar

- Invited expert to speak
  - Panel discussions
  - Presentation
  - System-wide
  - Follow-up

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## Intranet Resources

- In-Patient Education
- Nurse Talking points/Patient hand-outs
- Checklist to evaluate what has been covered
- Ability for all care-takers to know what has been taught
- Accessible on intranet

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## Standardized Discharge Education

- Comprehensive list of teaching points
  - Covers all patients regardless of age or type of diabetes
- Accessible on intranet

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## Future Projects

- Diabetes Symposium
- Research
  - Nursing Knowledge
  - Interactive teaching tools
- Website development
  - Videos
- Holding Lantus when NPO

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## Conclusion

- Due to identified gaps in practice, formation of new committee and Diabetes specialist role with strong educational support.
- Now need to measure how well the interventions have improved patient care and nursing knowledge
- In planning stages of research project: Nursing Diabetes Knowledge Assessment

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