

Diabetes Health Literacy Toolkit for New Graduate Nurses

(Reducing Failure to Rescue Rates Related to Hypoglycemia)

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Background

The National Council State Board of Nursing found that many graduating nurses though pass the NCLEX-RN are unprepared to deal with many of the complexes of the profession. It has been identified that many lack critical reasoning skills especially on the medical-surgical units to promptly identify patient deterioration and early warning signs (Vermont Nurse Connection, 2017). Research has shown that this problem leads to frustration and attrition of up to 27% in the first year of practice of these new graduate nurses (Hussein, Everett, Ramjan, Hu and Salamonson, 2017)

Statistics shows that about 25% of hospitalized patient have diabetes and about 18% experience Hypoglycemia of blood glucose less than 60mg/dl. Severe Hypoglycemia (less than 40mg/dl) occurs in another 5% of these patients. The symptoms of deterioration are often missed as many critically ill patients may have a condition known as hypoglycemia unawareness and many others lack the knowledge of hypoglycemia symptoms (Wexler, Melgs, Cagliero, Nathan, & Grant, 2007).

Problem

This project is to address the issue of “Failure to Rescue” by new graduate nurses of hospitalized patients whose condition is deteriorating due to hypoglycemia.

Objectives

New graduate nurses will:

- focus on identifying episodes of hypoglycemia in hospitalized diabetes patients
- take appropriate action in a timely manner, to avoid negative outcomes.
- utilize health literacy strategies as a tool to identify risk factors and use it to educate patients to increase their knowledge and comprehension of information provided.

Acknowledgement



Project Plan

To create a Diabetes Health Literacy Toolkit to assist new graduate nurses in identifying hypoglycemia in hospitalized patients and to educate patients on recognition of the signs and symptoms.

Toolkit

Developed to provide further resources to help increase skill sets to reduce hypoglycemia rates in hospitalized patients. <https://drive.google.com/open?id=1-osdmyiTXWsoSN4eykXXGle3YZhYXTja>

References

- America's Health Literacy: Why We Need Accessible Health Information. An Issue Brief From the U.S. Department of Health and Human Services. 2008.
- Dunn, D. J. (2010). The nurse role in health literacy. *The Florida Nurse*. 58(1), 14
- Hulkower, R. D., Pollack, R. M., & Zonszein, J. (2014). Understanding hypoglycemia in hospitalized patients. *Diabetes management (London, England)*, 4(2), 165–176. doi:10.2217/DMT.13.73
- Hussein, R., Everett, B., Ramjan, L.M., Hu, W. & Salamonson, Y. (2017). New graduate nurses' experiences in a clinical specialty: a follow up study of newcomer perceptions of transitional support.
- Johnson, A. (2014) *Health literacy: How nurses can make a difference?* *Australian Journal of Advanced Nursing, The*, Vol. 33, No. 2
- Journal of BioMed Central Nursning*, 16:42, 2-9. doi:10.1186/s12912-017-0236-0
- Vermont Board of Nursing. (2017, October, November, December). Next generation NCLEX. Retrieved from Vermont Nurse Connection.
- Wexler, D. J., Meigs, J. B., Cagliero, E., Nathan, D. M., & Grant, R. W. (2007). Prevalence of Hyper- and Hypoglycemia Among Inpatients With Diabetes: A national survey of 44 U.S. hospitals. *Diabetes Care*,30(2), 367-369. doi:10.2337/dc06-1715

