

Dumke College of Health Professions

ANNIE TAYLOR DEE —— SCHOOL OF NURSING

ABSTRACT

Education on the management of Type 1 Diabetes (TID) is crucial to positive long-term health outcomes (1). Public schools can provide TID children with access to health promotion through school nurses (2). School nurses have high workloads and cannot care for these patients on a daily basis (3). As a result, non-medical school staff are often responsible for providing daily assistance to TID children. This project aims to provide comprehensive, evidence-based education that can be used to prepare non-medical school staff.

PICOT QUESTION

How does education impact non-licensed school staff's ability to help TID students manage their symptoms?

LITERATURE REVIEW

- Newly diagnosed TID need adequate education to manage their disease & promote health (1).
- Effective education includes use of play-based therapies (3) and PowerPoint presentations (4).
- Education addressing mental health and therapeutic communication is also important (5).
- Schools are a consistent location to manage health (3).

Type One Diabetes:

Educational resources for delegation

Rachel A. Jensen, BSN, RN, MSN Student

PROJECT METHODOLOGY

The purpose of this MSN project is to utilize evidence-based practices to educate non-medical staff in preparation to care for children with TID in schools to improve health. Project materials were developed to implement this program, including an educational PowerPoint, a knowledge quiz, and a quick reference sheet

Plan and Development

- Create team stakeholders.
- Approval from administration
- •Education for non-medical school staff
- Quick Reference

Evaluation

 Pre-education & Post Knowledge tests





Figure 1



THEORETICAL FRAMEWORK

The PARIHS framework for change is a theoretical model that addresses the complex dynamics of implementing evidence-based change. This model aligns well with this project because it involves more than just the practitioner. This model provides a conceptual map for the individual, team, and organization involved in the change process (6). Effective collaboration of interdisciplinary teams positively impacts blood glucose management, minimizing long-term health risks associated with TID (1).

CONCLUSIONS

Schools can serve as a resource for TID students especially in rural areas. However, school nurse workloads make their daily participation unreasonable. School nurses can provide training to prepare staff to fill this role. Providing non-medical school staff with education can help them assist TID students, which can lead to better long-term health outcomes.

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Figures

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