



DIABETES CARE FOR PRIMARY HEALTHCARE NURSES

We would like to introduce you to a new online resource for nurses in primary care

This diabetes knowledge programme is brought to you by the New Zealand Society for the Study of Diabetes (NZSSD), supported by the Diabetes Nurse Specialist Section (DNSS) of NZNO.

The catalyst for its development is the increasing incidence of diabetes in New Zealand and the growing demands this creates for primary health care nurses in particular. A pressing need was identified for a contemporary and evidence based online resource to be readily available. The aim of this diabetes knowledge programme is to assist in developing knowledge and skills to both underpin and enhance nursing practice to enable primary health care nurses to work effectively with people and whānau / families who live with diabetes.

The content of this programme is based on a workbook developed by the Whanganui Regional PHO, and is aligned with the nationally endorsed National Diabetes Nursing Knowledge and Skills Framework (NDNKSF) (2009). Working to the framework will help to meet existing professional development requirements and will also assist in the progression on the pathway in diabetes specialisation -

The framework identifies a number of knowledge and skill levels for nurses working in diabetes -

- Fundamental
- Generalist
- Specialty Diabetes Nurses
- Specialist Diabetes Nurses

The diabetes knowledge programme addresses the fundamental and generalist levels required by all nurses to support their confidence and effectiveness when caring for people with diabetes and their family/ whānau. It is intended as a professional development activity, and attracts seven hours towards requirements for a nursing professional portfolio. This programme and the NDNKSF are two of the many tools enabling nurses to develop capability in providing diabetes care. They do not sit alone but rather within the context of having annual updates, utilising and working alongside local expertise, and other such activities.

In the future we intend to expand the resource to support engagement and collaboration – peer to peer and across disciplines - to reflect the diabetes model of care.

“Ko koe ki tenā, ko ahau ki tenei, kiwai o te kete”

“You hold that handle and I’ll lift this handle, and together we can carry the kete”

NURSES ARE SUPPORTED IN THIS DIABETES KNOWLEDGE RESOURCE BY – NZSSD AND DNSS / NZNO





MODULE.01 *About Diabetes*

Reading time approximately 45 minutes

What is diabetes?

Types of diabetes

Glucose metabolism

How to diagnose diabetes

Symptoms of diabetes



MODULE.02 *Self-management strategies*

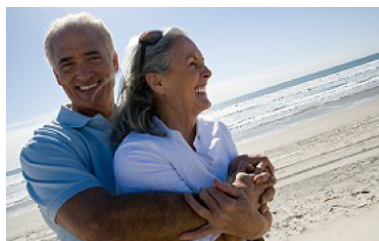
Reading time approximately 60 minutes

Overview of diabetes management strategies

Physical activity

Healthy food choices

Common glucose lowering medications for people with type 2 diabetes



MODULE.03 *Blood glucose monitoring*

Reading time approximately 45 minutes

Self blood glucose monitoring

Blood glucose goals for self blood glucose monitoring SBGM

Self blood glucose testing meters

What does the HBA1c level tell you



MODULE.04 *Hyperglycaemia and hypoglycaemia*

Reading time approximately 60 minutes

Hypoglycaemia (low blood glucose levels)

Hyperglycaemia

Management of diabetes when sick



MODULE.05 *Self-management support*

Reading time approximately 45 minutes

Considerations in self management support

The impact on families

Promoting self efficacy independence and health

Motivational interviewing

Long term conditions model



MODULE.06 *Complications of diabetes*

Reading time approximately 45 minutes

Chronic diabetes complications

What to do if a risk or complication is identified

Identifying and managing at risk feet

Prevention of complications



MODULE.07 *Insulin initiation*

Reading time approximately 60 minutes

When do people with type 2 diabetes need to start on insulin?

What insulin does the person need?

How to start the person with type 2 diabetes on insulin

Titrating insulin over time

Insulin when the person with diabetes is sick or has an injury



MODULE.08

Kowhaiwhai

Tagata Pasifika in New Zealand

Special thank you

References / links and attachments

CVD Risk calculator

FINAL ASSESSMENT AND CERTIFICATE

Approximately 45 minutes


Multi-questionnaire assessment – certificate of completion by NZSSD



SCREENSHOTS FROM SOME OF THE MODULES

FOR NURSES WORKING IN PRIMARY CARE
SELF DIRECTED LEARNING MODULES

HOMEABOUT USALL MODULES



02. DIABETES SELF MANAGEMENT STRATEGIES

Welcome Tommo [Logout](#)

>> OVERVIEW OF DIABETES MANAGEMENT STRATEGIES FOR PEOPLE WITH TYPE 2 DIABETES

>> PHYSICAL ACTIVITY

>> HEALTHY FOOD CHOICES

>> DIABETES MEDICATIONS

>> COMMON ORAL GLUCOSE LOWERING MEDICATIONS USED FOR PEOPLE WITH TYPE 2 DIABETES

>> INSULIN

>> BLOOD PRESSURE LOWERING MEDICATIONS


>> CHOLESTEROL IMPROVING MEDICATIONS

60 MIN


READING TIME

OVERVIEW OF DIABETES MANAGEMENT STRATEGIES FOR PEOPLE WITH TYPE 2 DIABETES

The major metabolic issues in type 2 diabetes that require management are:



The three major strategies that your patient can use to manage these are:



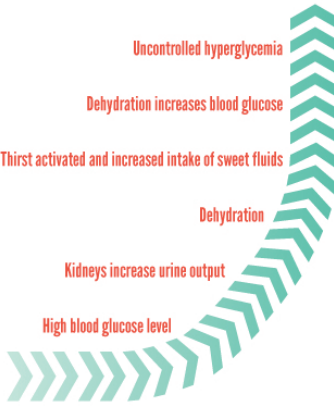
SEQUENCE OF EVENTS IN HYPERGLYCAEMIA


In normal metabolism the kidney reabsorbs the glucose it has filtered from the blood completely. In health the urine contains no glucose. However if blood glucose levels exceed around 8 – 9 mmol/L the kidney's ability to reabsorb glucose is exceeded. Extra glucose spills into the urine (glycosuria).

This excess glucose in the urine causes an osmotic diuresis i.e. the glucose draws excessive amounts of water from the body into the urine. This leads to polyuria (excess urine production) and dehydration.

Dehydration stimulates thirst and this causes excessive drinking (polydipsia). Often people with uncontrolled glucose levels and undiagnosed diabetes will attempt to quench this thirst with sweet and/or energy dense drinks. This further raises the blood glucose level and results in greater diuresis of urine and increased dehydration.

Dehydration results in decreased blood volume which concentrates glucose in the blood and leads to increased urine output and increasing dehydration in an uncontrolled cycle.






When a person is hyperglycaemic always check what fluids he or she is drinking. Encouraging them to switch from sweet fluids to water will help to break the hyperglycaemia cycle and reduce blood glucose levels.

FOR NURSES WORKING IN PRIMARY CARE
SELF DIRECTED LEARNING MODULES

HOMEABOUT USALL MODULES



01. ABOUT DIABETES

Welcome Tommo [Logout](#)

SYMPTOMS OF DIABETES

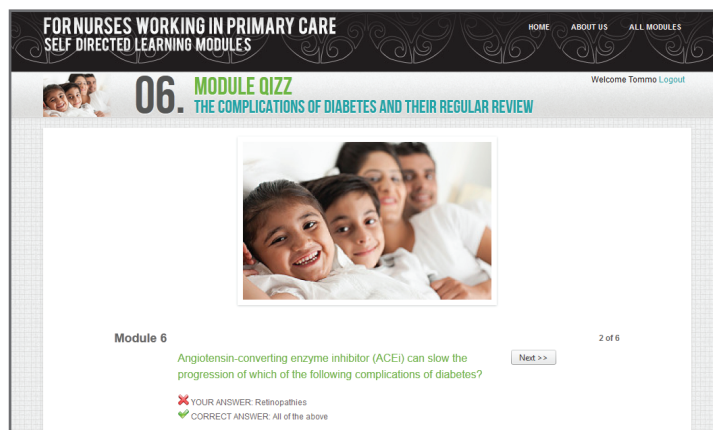
Type 1 Diabetes

Type 2 Diabetes

SYMPTOMS OF UNDIAGNOSED OR UNCONTROLLED TYPE 1 DIABETES

Type 1 diabetes is usually very symptomatic and much more acute:

- Rapid or uncontrolled weight loss (often dramatic)
- Extreme thirst
- Increased urination
- Exhaustion
- Rapid breathing
- Abdominal pain
- Presence of ketones in the urine or blood



We encourage self-testing and reflection on the learning in this resource. There are quizzes at the end of each module with pop-up answers to give feedback and to support the learning experience. Like the whole programme – these self-tests can be re-visited as often as needed.

USING THE WEBSITE

Access to the materials is for New Zealand registered Nurses practising in the primary health care setting.

There are seven modules to complete. The modules can be accessed at any time and track what has been read. Reading times for each topic is approximately 45 minutes. At the beginning of each module there is a note giving indicative reading times.

At the end of the seven modules there is an assessment questionnaire to complete with an 95% pass required. (Several attempts can be made to meet the pass rate but if unable to successfully complete it, another review and reflection of the reading material will be required). A NZSSD certificate of completion and professional development hours will then be awarded to print and be added to the professional development portfolio.

We encourage nurses to continue this journey increasing their knowledge and skills and supporting the person with diabetes in self care to the best of their ability.

You can reach the website via NZSSD -- www.nzssd.org.nz or NZNO – www.nzno.org.nz
Or at www.healthmentoronline.com. Other access points will be added over the next few months.

We look forward to having you join us on this exciting journey as we continue to develop this resource for nurses, other clinicians and allied health professions all of whom play such important roles in providing support for those in our community who are affected by diabetes.

HUTIA TERITO

*Hutia te rito o te harakeke
Kei whea te komako e kō
Kī mai ki ahau He aha te mea nui o te Ao
Māaku e ki atu He tāngata, he tāngata, he tāngata*

*If the heart of harakeke was removed, where would the bellbird sing?
If I was asked, what is the most important thing in the world;
I would be compelled to reply, it is people, it is people, it is people*