IMPROVING ADHERENCE IN PATIENTS WITH DIABETES: NURSES’ ROLE

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Background/Significance: Diabetes prevalence is high in Milwaukee County, estimated at 13%. Any patient can be non-adherent to recommendations; adherence has minimal correlation with socioeconomic status or education level. Much research has been done on the physician-patient relationship and that between advanced practice nurses and patients. For patients with diabetes, active support by clinicians is effective in improving adherence (Coulter & Ellins, 2007); relationship between the patient and clinician is most important (Edwall, Hellström, Ohrn, & Danielson, 2008; Maddigan, Majumdar, & Johnson, 2005; Pill, Rees, Stott, & Rollnick, 1999).

Purpose of the Study/Project: Use simulation to influence the Knowledge, Skills and Attitudes (KSAs) of nurses caring for patients with diabetes.

Conceptual Frameworks: Synergy Theory and Krathwohl, Bloom, and Masia’s (1964) Hierarchy of the Affective Domain guided this project.

Sample Description/Population: Presentation attendees ranged from inpatient staff nurses to diabetes educators. They varied in educational level attained and ranged from new graduate nurses to those with 30+ years of experience.

Setting: The presentation was delivered to five different groups at three health care organizations in the City of Milwaukee.

Method/Design & Procedure: A script was written for “Janet,” a simulated patient, who has experienced multiple barriers to diabetes self-care and difficulty accessing the health care system; audio recording of the script was embedded into PowerPoint slides for an hour-long interactive session. Janet’s story was designed to allow nurses to uncover and examine their own attitudes towards such patients with diabetes, as well as to learn communication techniques that are more likely to enhance patients’ adherence. An anonymous evaluation was distributed and collected directly afterward.

Results/Outcomes: 32 anonymous evaluations were returned. 84% of those who responded identified that the presentation had assisted them to uncover their own attitudes toward patients with diabetes who are non-adherent, showing they had at least reached the Receiving level of the Affective Hierarchy; 81% identified at least one new strategy to use in the following week, showing they had reached the level of Responding. Three respondents indicated they had previously internalized the values presented. Eighteen respondents identified they had learned new words, language, or phrasing that would help them communicate more positively; seven identified they would listen more. Nine indicated discovering that they had been judgmental.

Conclusions/Implications: Using simulation in a small-group format seems to have had some effect, at least in the short term, for teaching and encouraging KSAs among working nurses. More research is needed. A follow-up evaluation would be valuable to ascertain whether the KSA’s were put into practice.