OBJECTIVES
1) Define the role of the Diabetes Resource Nurse (DRN) in the hospital setting.
2) Describe the efforts that DRN had on department compliance with the Hypoglycemia Protocol.

PURPOSE
The purpose of the research project was to assess whether the use of department DRN’s would influence RN compliance with hospital wide Hypoglycemia Protocol.

METHODOLOGY
Two nursing departments, one ICU and one med-surg, were chosen to implement the DRN program. The Inpatient Diabetes Program will organize and oversee the Diabetes Resource Nurse program.

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REFERENCES

DIABETES RESOURCE NURSE
Purpose
To improve patient outcomes related to glycemic control.

Strategies
Each unit will have designated DRN’s to fulfill the role of Diabetes Resource Nurse. The Inpatient Diabetes Program will organize and oversee the Diabetes Resource Nurse program.

Roles and Responsibilities
- Meet on a regular basis with the Diabetic Coordinator (DC) for updates on patient care and outcomes.
- Facilitate recognition of DRN leadership role and contributions.
- Provide diabetes education to staff as needed.
- Meet frequently with DRNs to provide updates and review issues.
- Provide monthly updates regarding diabetes treatment approaches and audit information from the Diabetes Treatment Program.
- Aid in the ongoing development of the DRN roles and responsibilities.
- Provide initial and ongoing education regarding diabetes treatment approaches and available resources (i.e. journal articles, etc.).

Examples of topics provided to DRN’s
- Treatment algorithms for diabetes.
- Quick Tips for Diabetes Protocol Order Sets.
- Quick Tips for Glucoseclamp nation.
- Quick Tips for Insulin-Mis-Matched Coverage.
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- Carbohydrate-Counting and Insulin Meal Coverage.

SCOPE OF PROBLEM
Hypoglycemia is a “never event” according to the Centers for Medicare and Medicaid services. Proper treatment and correct use of the hospital wide Hypoglycemia Protocol is essential to ensure best practice. After auditing hypoglycemia, it became obvious that the Hypoglycemia Protocol was not being used properly.

RESULTS
- Use of the hypoglycemia protocol increased on both nursing departments.
- As a result of teaching, sharing education in huddles and staff meetings, the Diabetes Resource Nurses (DRN) directly impacted outcomes of patient care evidenced by the increase in the use of and compliance with the protocol.
- An indirect result of implementation of the DRN program was a decrease in hospital acquired infections.
- A direct result of the implementation of the DRN program was a decrease in hypoglycemia rates in both departments...directly impacting patient outcomes.

CONCLUSION
Implementation of the Diabetes Resource Nurse program directly impacted patient outcomes as evidenced by increased usage of and compliance with the Hypoglycemia Protocol. Furthermore, the rate of hypoglycemia decreased significantly in the ICU. The results of this study have prompted the institution to initiate the DRN program hospital wide and outcome measures will continue to be collected and analyzed.

DO THEY MAKE A DIFFERENCE?
Marsena Pardee, RN, BSN, MHA, Jenny Simpson, RN, MSN, BC-ADM, Rhonda Vaughan, RD, LDN, CDE, and Crissy Dodson, RN, MSN

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Treating nurses, one ICU and one med-surg, were chosen to implement the DRN program. Hypoglycemia rates and adherence to hypoglycemia protocol were assessed pre-implementation and 3 months post-implementation of the DRN role.

Statistical Methods
Researchers used hospital glucose meter reports and concurrent chart audits to collect appropriate data for analysis. Z-test’s were performed to assess significance of proportions.

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