

Diabetic Foot Care in Hispanic Females with Type II Diabetes: An Evidence-based Quality Improvement Initiative

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BACKGROUND

- In 2018 diabetes affected 30.5 million people in the United States at an annual cost of approx. 245 billion dollars^{1,2}
- 176 billion dollars spent on health care costs¹
- 69 billion dollars spent on reduced workforce productivity^{1,2}
- Diabetic prevalence by ethnicity includes population base for Hispanic's at 12.2%, African Americans at 17.0 %, Caucasians at 10.2 % other multiracial populations at 7.1 %^{1,2}

PURPOSE

Diabetes is an urgent health problem in Hispanic communities with rates almost double those of non-Hispanic whites. Type II diabetes causes a wide-ranging debilitating or life-threatening complications to the heart, kidney, eye, and nervous system¹

Peripheral neuropathy in lower extremities combined with atherosclerosis in the lower extremities increases the risk for diabetic foot complications.²

Providing preventative services to existing Type II diabetic foot protocols can be inconsistent⁶

Early interventions reduce foot complications due to vascular disease, can be reduced in transient populations with Type II diabetes⁶

METHODS

Evidence Based Practice Implementation Plan:
(P) In Hispanic females with Type II Diabetes (I) how does adding diabetes self-management education with teach-back demonstration to a healthcare regimen (C) compared to no patient education added (O) affect the incidence of diabetic foot complications (T) over a three to six-month period?

NEW PROTOCOL

•ICE-My Foot Cards

•ICE-MF Cards

•Ask Providers to:

- I-Inspect feet & Identify issues
- C- Communication–Teach-back
- E- Educate patient and reinforce concerns
- M-Medication adherence and reinforcement
- F-Follow up-visits



•The 5 Daily Do's

1. DO you **check** your blood sugar?
2. DO you **look** at your feet?
3. DO you **know** what to look for?
4. DO you **practice** foot care?
5. DO you **have** any questions?

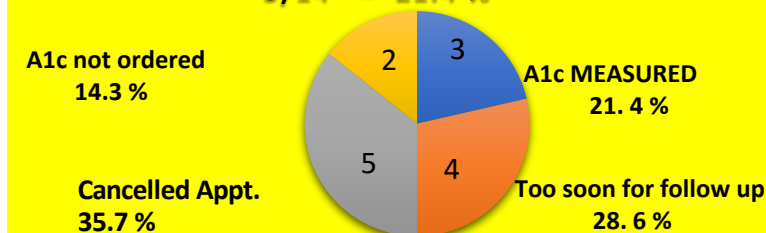
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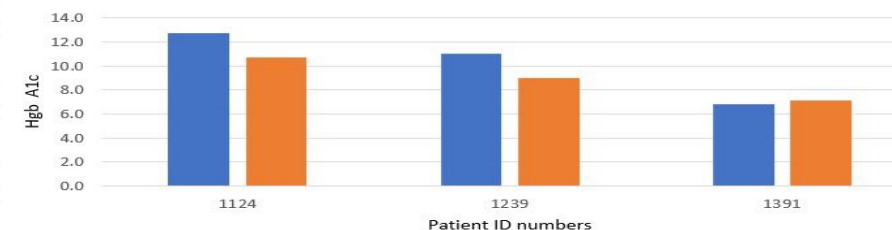
RESULTS

Patients with teach back and A1c

$$3/14 = 21.4\%$$



A1c change in the teachback group
n = 3



CONCLUSIONS

- Diabetes is a complex disease requiring patients to make numerous daily decisions including changes in diet, activity and medication management⁵
- Learning effective self-management skills is a critical component in patient education³
- Facilitating provider knowledge and skills improves patient diabetic self-management behaviors⁵
- It is possible to design a plan for keeping the feet healthy utilizing interventions such as provider education, empowering patients on teach back “show me” or “closing the loop” methods and active patient participation³
- Everyday foot care plays the biggest role in preventing foot complications²