Over 18,000 youth are diagnosed with Diabetes Mellitus, Type 1 (DM1) each year, which works out to 1.93 out of every 1,000 children. Additionally, 75% of all cases of DM1 are diagnosed in children and adolescents under the age of 18. DM1 can be frightening for the patient and their family, and understandably so. It is a lifelong and serious condition, and a whole new lifestyle to adjust to for both the patient and their family.

With the presentation of an illness such as diabetes, it is important that nurses are well versed in how to properly educate patients and their families about a new diagnosis of DM1.

**Knowledge is power.** Helping to properly educate patients and families can ease their fears, help them to better adjust to a new way of life and ultimately ensure that they are more compliant with their care plans. Check out the Dynamic Health™ competency checklist below to see if your nurses are checking all the boxes when it comes to educating their young patients with DM1 and their families.

### PRE-PROCEDURE STEPS

1. Review patient’s preprocedure plan and understand how it will impact teaching strategies.
2. Review facility protocols/policies and unit practices specific to teaching the patient and family about DM1.
3. Perform hand hygiene.
4. Maintain standard precautions and verify that all assisting personnel do the same.
5. Introduce yourself to the patient/family.
6. Provide privacy for the patient.
7. Identify the patient per facility protocol.
8. Listen for cues that the patient/family is ready to learn. Be alert to differing stages of learning readiness by patient/family.
9. Evaluate preferred learning style.
10. Evaluate patient- and family-identified learning priorities, needs, and desires.
11. Assess barriers to learning, such as memory or cognitive issues, learning disabilities, physical limitations, language barriers, low literacy, impaired hearing, sight or speech, financial issues, and cultural, psychosocial or emotional concerns.
12. Verify that supplies are available.
13. Identify high-quality teaching tools that align with the patient’s learning characteristics.
14. Identify on-site and online resources.

### PROCEDURE STEPS

1. Develop a plan for teaching that is comprehensive, but divisible into segments to avoid overwhelming the patient/family.
2. Individualize the plan to meet the patient’s/family’s specific learning needs.
3. Use high-quality teaching tools, such as clear, concise print materials written at a 5th grade reading level.
4. Discuss and set mutually achievable learning goals with the patient/family.
5. Focus initial education on answering basic questions about DM1, equipment, any tests, and treatments, as appropriate.
6. Focus subsequent education on management and strategies for helping with the emotional and psychosocial aspects, as appropriate.
7. Anticipate a planned approach but remain flexible.
8. Use various teaching/learning strategies.
10. Use appropriate written, Internet, and community resources.
11. Provide choices in the learning experience and schedule.

### POST-PROCEDURE STEPS

1. Ask patient/family if any learning needs are unmet.
2. Perform hand hygiene.
4. Use a “teach-back” method to evaluate understanding.
5. Ask patient/family to confirm that the education was helpful.
6. Adjust the education plan if the patient/family’s response is < 7, on a scale of 0–10.
7. Communicate any concerns with the multidisciplinary healthcare team so that information can be reinforced, and the learning plan can be continued or modified accordingly.

Like what you saw?

There’s lots more where this came from. Dynamic Health™, an innovative new evidence-based tool, offers thousands of actionable clinical skills and accompanying competency checklists to help nurses and allied health professionals master clinical skills. Learn more and find out how you can access this comprehensive resource at the link below.

**See it in Action**

**Educating Children or Adolescents with Diabetes Mellitus, Type 1: Empower Your Patients with Knowledge**